



THE HEALTH OF CHELTENHAM

1967

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SCHOOL MEDICAL OFFICER

J. F. URSELL, D.P.A., F.A.P.H.I.
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Annual Report on the Health of the Borough of Cheltenham for the Year 1967

*To the Worshipful the Mayor, the Aldermen and Councillors of the
Borough of Cheltenham*

Mr Mayor, Ladies and Gentlemen,

There is little adverse comment that one can make on any aspect of the health of the town, and if no striking improvement can be shown by comparison with health reports in recent years, this is because of the general high standard of health enjoyed by the community, and demonstrated by the statistics embodied in the report. There is no single health service responsible for this satisfactory state of affairs. It is due to a combination of teamwork involving the Local Authority, the Hospital and Family Doctor services, and close and constant attention to all means and methods by which the health of the community can be promoted and improved.

One aspect of our Local Authority Health Services which has been developed and extended during the year has been the attachment of our nursing staff to family doctor practices in the town. Health Visitors and District Nurses are being attached to general practices with increasing benefit to the doctor's patients and increasing co-operation between the Local Authority health services and general practice.

The infant mortality rate has again fallen below last year's level, and at 16.1 per thousand live births, can be considered very satisfactory. The rate for the previous year was 17.8. This is the fourth successive year which has shown a fall in the infant death rate, which in each case has been below the average for the country. I think it can be said now that this aspect of the health of the town, which was a matter for concern some years ago, is now quite satisfactory. Another problem which worried us some years ago, the large number of very small premature babies, with the resultant adverse effect on the infant mortality rate, has also disappeared. Altogether a very pleasing picture, only marred by a further sharp increase in the percentage of illegitimate births.

Progress, as far as new projects are concerned, is still severely limited as a result of the economic situation, and this we must accept. There is no prospect yet of a new Junior Training Centre, a new Day Nursery or a Dental Surgery at Hesters Way Health Centre. There is a possibility that work will start after 1st April, 1969, on extensions to the Adult Training Centre, and the building of a Sheltered Workshop for the disabled.

Apart from the economic situation, future prospects are anyone's guess. We may be, and probably are, about to see drastic changes not only in the administration of the Health and Welfare Services, but in Local Government as a whole. What is in store for us has yet to be revealed in the report of the Seeborn Committee (Health and Welfare Services), the Minister's Green

Paper (Administrative changes in the National Health Service) and the Report of the Royal Commission (Local Government). It is a formidable prospect, we can only hope for the best.

The following is a short summary of the more important aspects of the public health in Cheltenham during the year, which may be convenient for those who do not wish to study the report in detail.

Infant Mortality

There were twenty deaths among the infants under one year of age. The infant mortality i.e., the number of infants who died in the first year of life per 1,000 live births was 16.1 compared with 17.8 in 1966, a rate again below the average for England and Wales (18.3).

Tuberculosis

There has been a reduction, both in the number of notified cases of tuberculosis and in the number of deaths from the disease.

Lung Cancer

There has been a reduction in the number of deaths from Lung Cancer, but the incidence is still high and in keeping with national statistics.

Cervical Cytology

Facilities for this test have now improved and we have been able to increase the number of examinations carried out in the clinic. Examinations are still limited to the priority class, namely women over thirty-five years who have had children. In spite of increased facilities and publicity, the response has not been overwhelming.

Other Vital Statistics

There has been another small increase in the population from 75,510 in 1966 to 75,640 in 1967. There has been another drop in the birth rate from 17.8 in 1966 to 16.4 in 1967. There has been a fall in the death rate from 13.0 per 1,000 population in 1966 to 11.4 in 1967.

In conclusion, I would like to thank the Chairman and Members of the Health and Welfare Committee for their support and encouragement throughout the year, and all the staff of the Health Department for their loyalty and co-operation and in particular Mr J. F. Ursell, Chief Public Health Inspector and my Chief Clerk Mr W. H. G. Meakins. As usual I have had the fullest co-operation from family doctors and the hospitals in the administration of the Council's health services, and at all times, when requested, the ready and helpful assistance of the local Press.

T. O. P. D. LAWSON,
Medical Officer of Health.

Health Department,
P.O. Box No. 12,
Municipal Offices,
Cheltenham, Glos.
Telephone 21333.

SECTION I

ENVIRONMENTAL HEALTH SERVICES

HEALTH AND WELFARE COMMITTEE

Alderman R. F. BROOKES (*Chairman*)

Alderman A. J. BETTRIDGE (*Vice-Chairman*)

Councillor J. A. ASTON

Alderman C. W. A. FOSTER

Alderman Miss M. N. P. DENT

Councillor B. R. T. GAYLARD

Alderman A. G. DYE

Councillor D. H. St. L. MORRIS

Councillor Miss D. FAVELL

Councillor T. A. O'BRIEN

Councillor Mrs M. F. YEATES

Co-opted Members

Mrs G. MELLERSH

Mr A. F. NUTTER

Mrs D. M. SHENTON

Mrs H. SMITH

(Public Health and Welfare and Health Committees amalgamated May 1967)

SCHOOL HEALTH SERVICE

Special Services Sub-Committee

Councillor D. OWEN (*Chairman*)

Councillor D. G. ALDRIDGE

Mr W. A. GETHING

Mr F. A. DELLAR

Miss D. HORTON

Alderman Miss M. N. P. DENT

Mr W. TIPLADY

Councillor Miss D. FAVELL

Councillor A. H. YATES

Councillor L. F. F. GAYLARD

Councillor Mrs M. F. YEATES

SUMMARY OF GENERAL AND VITAL STATISTICS, 1967

Area of Borough	...	...	...	...	...	5,146 acres
Population Mid-year 1967 Registrar General's Estimate	...	...	...	...	...	75,640
Number of inhabited houses	(a)	Houses and Flats	...	...	...	24,766
(as at 31.3.68)	(b)	Hotels, Occupied	...	...	...	552
		Shops, etc.	...	...	...	£3,456,749
Rateable Value (as at 31.3.67)	...	...	...	...	...	£14,025 (est.)
Sum represented by a penny rate (1967-68)	...	...	...	...	...

TABULAR STATEMENT OF THE MAIN VITAL STATISTICS FOR 1967

(with comparative figures for England and Wales)

	M.	F.	Total	Cheltenham	England and Wales
LIVE BIRTHS					
Legitimate	572	520	1,092		
Illegitimate	76	74	150		
TOTALS	648	594	1,242		
Rate per 1,000 population				16.4	17.2
ILLEGITIMATE LIVE BIRTHS					
Per cent of total live births	76	74	150	12.1%	
STILL BIRTHS					
Legitimate	3	8	11		
Illegitimate	2	—	2		
TOTALS	5	8	13		
Rate per 1,000 total live and still births				10.0	14.8
TOTAL LIVE AND STILL BIRTHS ...	653	602	1,255		
INFANT DEATHS (Deaths under 1 year)					
Legitimate	12	6	18		
Illegitimate	—	2	2		
TOTALS	12	8	20		
INFANT MORTALITY RATES					
Total infant deaths per 1,000 total live births				16.1	18.3
Legitimate infant deaths per 1,000 legitimate live births ...				16.5	
Illegitimate infant deaths per 1,000 illegitimate live births ...				13.3	
Neonatal Mortality Rate (deaths under 4 weeks per 1,000 total live births)				11.1	12.5
Early Neonatal Mortality Rate (deaths under 1 week per 1,000 total live births)				8.1	
Perinatal Mortality Rate (Still births and deaths under 1 week combined per 1,000 total live and still births)				18.3	25.4
MATERNITY MORTALITY (including abortion)					
Rate per 1,000 total live and still births		—	—	—	0.2
DEATHS (all ages)	371	492	863		
Rate per 1,000 population				11.4	11.2

NOTE : The figures for births and deaths are corrected for inward and outward transfers in order that the statistics may give as true a picture as possible of local conditions.

NOTES ON VITAL STATISTICS FOR 1967

Population

The Registrar's estimate of the population of Cheltenham for mid-year 1967 is 75,640 which is 130 more than the estimate for 1966.

Death Rate

The Crude Death Rate was 11.4 a lower figure than that of last year. The corrected Death Rate (Registrar's comparability factor 0.91) was 10.4 which is slightly lower than the figure for England and Wales.

Birth Rate

Live Births in 1967 totalled 1,242 which is 103 less than the figure for the previous year.

The Birth Rate was 16.4 and is 1.4 lower than the figure for 1966. The Registrar now provides a comparability factor for birth rates. For Cheltenham this factor is 0.98 which gives a rate of 16.1 compared with 17.2 for England and Wales.

The number of Still Births per 1,000 live and still births, was 10.0 (or 9.8 corrected) compared with 14.8 for England and Wales.

Causes of Death relating to Cheltenham Residents as given by the Registrar General for the year 1967

	Male	Female
Tuberculosis, respiratory	1	1
Syphilitic disease	1	1
Other infective and parasitic diseases	1	2
Malignant neoplasm, stomach	12	11
Malignant neoplasm, lung, bronchus	27	8
Malignant neoplasm, breast	—	25
Malignant neoplasm, uterus	—	9
Other malignant and lymphatic neoplasms	44	53
Leukaemia, aleukaemia	—	1
Diabetes	2	5
Vascular lesions of nervous systems	35	72
Coronary disease, angina	109	99
Hypertension, with heart disease	5	4
Other heart disease	33	93
Other circulatory disease	9	19
Influenza	3	—
Pneumonia	23	31
Bronchitis	9	10
Other diseases of respiratory system	2	—
Ulcer of stomach and duodenum	3	1
Gastritis, enteritis and diarrhoea	2	4
Nephritis and nephrosis	4	1
Hyperplasia of prostate	2	—
Congenital malformations	5	4
Other defined and ill-defined diseases	23	29
Motor Vehicle accidents	8	4
All other accidents	3	2
Suicide	5	3
All Causes	371	492

DISCUSSION

A study of the number of deaths caused by various diseases is not just a matter of comparing figures. It helps us to sort out our priorities and often shows where prevention is most needed. As an example one need only draw attention to the thirty-five deaths from lung cancer, most of them preventable, to realise the importance of health education, especially among the younger members of the community. This is a long and slow process but it is beginning to show results. As usual heart disease, associated with disease of the coronary arteries and high blood pressure, is the main cause of death and an increasing amount of research is being devoted to the prevention of this condition.

Although a lot of time, effort and publicity are rightly put in to the prevention of cancer of the cervix by Cervical Cytology, about six times as many women died during the year in the town from cancer of the breast. Nationally 2,500 women die each year from cancer of the cervix and 10,000 die from cancer of the breast. This is why we include in the cervical cytology examination, an examination for the early detection of cancer of the breast, a much more common and more deadly disease.

Deaths from Accidents

Deaths from all types of accidents during the year amounted to 18 and 12 of these were caused by motor vehicles. The corresponding figures for 1966 were 23 and 10 respectively. These figures are fairly constant year by year and reflect very favourably the effort made by the Council in the promotion of home and road safety.

Infant Mortality

There were 20 infant deaths during the year compared with 24 in 1966, giving an infant mortality rate of 16.1. The rate for 1966 was 17.8. This year's rate is again below the national average of 18.3. The causes of the 20 infant deaths were as follows :

					<i>Neonatal</i>		<i>Total</i>
					(0-4 wks.)	4 wks.-1 yr.	
Prematurity (stated or considered to be main cause of death)	...	...	...	...	4	—	4
Respiratory	...	...	...	...	3	2	5
Congenital Defects	...	...	...	...	6	1	7
Accidental Deaths	...	...	...	...	—	1	1
Cerebral Haemorrhage	...	...	...	...	1	—	1
Other Causes	...	...	...	...	1	1	2
					—	—	—
					15	5	20
					—	—	—

There is no special significance in the cause of these deaths. They follow the usual pattern. Although one would not expect, in this antibiotic era, to see one quarter of the infant deaths ascribed to respiratory disease, two of the five deaths reported were associated with other serious conditions.

WATER SUPPLY OF THE BOROUGH

The following report has been received from the North West Gloucestershire Water Board :

The water supply from all the sources which supply the Borough has been satisfactory in both quality and quantity.

Intermittent discolouration of the supply during the warmer months of the year has continued to be a nuisance, but the North West Gloucestershire Water Board is currently constructing additional plant for the elimination at source of this very complex problem. The application of the further remedial measures to distribution mains, must, however, take a further period of time.

Bacteriological and chemical examinations are made regularly of the various raw waters at sources and of the final waters going into supply. In 1967, at the main source of the Borough's supply—Mythe Waterworks, Tewkesbury—1313 bacteriological examinations were made of the final water going into supply.

The control of other sources of supply was covered by examinations as below :—

							<i>Raw Water</i>	<i>Final Water</i>
Dowdeswell								
Bacteriological	...	...	...	...	...	...	19	19
Chemical	...	...	...	...	...	...	4	6
Northfield								
Bacteriological	...	...	...	...	...	...	12	16
Chemical	...	...	...	...	...	...	4	3
Sandford								
Bacteriological	...	...	...	...	...	...	—	13
Chemical	...	...	...	...	...	...	—	7
Hewletts								
Bacteriological	...	...	...	...	...	...	—	19
Chemical	...	...	...	...	...	...	—	7

The condition of the water at the consumers' taps is supervised additionally and this has been covered by 129 bacteriological samples and 7 chemical samples.

The number of dwellinghouses connected to the public water mains is 29,700 and the number of the population supplied 75,640, all direct to the houses.

Radioactive Contamination of Water Supply and Rainfall

The level of radioactivity which has been recorded in the rainfall—the original source of water supply—increased appreciably in early 1967 following Chinese explosions in late 1966. A steady decrease was recorded until mid-1967 when it was interrupted to a minor extent by further Chinese and French nuclear explosions; the decrease was similarly affected by the seventh Chinese explosion in late 1967.

Despite this set-back, the level of activity in the raw water and in the final supply has remained at a very low and acceptable level.

SEWERAGE AND SEWAGE DISPOSAL

The present sewerage and water pollution control arrangements are just adequate for present needs but the Council have submitted a proposal to the Ministry for the first stage of extensions to the Water Pollution Control plant at Hayden, which will enable the plant to deal with a dry weather flow of 8 million gallons per day. It is hoped that the Ministry will be holding an Inquiry into these proposals in the very near future.

With regard to the sewerage arrangements, it is considered that both the Chelt main sewer and the Hatherley sewer are overloaded and investigations into both these systems are now being undertaken. It is hoped to be in a position to submit a draft proposal with estimates to the Public Works Committee in respect of the replacement of the Chelt Main Sewer in the very near future.

The Council have also submitted a proposal to the Ministry for the construction of the Northern Outfall Sewer, and an enquiry into this is expected to be held shortly. The construction of this sewer, together with a future scheme of drainage in conjunction with the Cheltenham Rural District Council, will enable the Barn Farm Sewer, also Barn Farm, to be dispensed with.

SWIMMING BATHS

There are two public swimming baths in the town, a covered bath and an open-air pool. In both cases the source of the water used for filling is the mains supply and the method of treatment is filtration and automatic chlorination. In the covered bath there is a complete change of water every four hours, both in the main pool and the instructional pool. In the open-air pool there is a complete change every six hours.

Regular samples of water from the swimming baths are submitted for bacteriological examination. They showed that a satisfactory standard had been maintained throughout the year. The Chief Public Health Inspector arranges for the routine collection of samples by the Inspectors. These samples are sent for examination to the Analyst, Mr J. Henderson, at Tewkesbury, and reports are submitted to the Public Health Committee.

MILK (SPECIAL DESIGNATION) REGULATIONS

During 1967, licences to use special designations in relation to milk sold within the Borough totalled one hundred and forty-four.

Samples are taken fortnightly for analysis and the reports are submitted to the Health Committee.

Very few results during 1967 failed to satisfy the standards of the Ministry of Health.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES

The following statement shows the corrected numbers of cases notified during 1967. (Tuberculosis is dealt with separately).

Erysipelas	1
Food Poisoning	5
Measles	341
Meningococcal Infection	2
Ophthalmia Neonatorum	1
Puerperal Pyrexia	19
Scarlet Fever	7
Whooping Cough	10

NOTES ON INFECTIOUS DISEASES

Apart from measles, the effect of the notifiable infectious diseases on the health of the community is negligible. Vaccination against the disease has proved effective and acceptable in other parts of the country, notably in Oxford where the Medical Officer of Health has reported very encouraging results. The widespread use of the vaccine should be the general practice in the very near future.

VENEREAL DISEASES

The following report has been received from Dr A. E. Tinkler, M.A., M.D., D.P.H., Consultant Venereologist, South Western Regional Hospital Board. It is a satisfactory report by comparison with previous years and although one would always want to see a reduction in the figures, it is at least pleasing to note that Cheltenham is not sharing in the general increase in incidence of these diseases.

The continued rise in the incidence of venereal disease in the country as a whole, particularly amongst young people, is a matter for grave concern. In Cheltenham, however, there was a significant reduction in the total number of new cases seen in 1966 and it is encouraging to note that the increase in 1967 over the previous year is very small and appreciably below the national average.

TABLE 1. New Cases : All Conditions—Cheltenham 1961-1967.

Year	Syphilis		Gonorrhoea		Other Conditions		Total		Totals
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	
1961	2	—	15	8	73	26	90	34	124
1963	—	1	19	13	62	29	81	43	124
1965	1	3	41	28	96	51	138	82	220
1966	3	—	28	11	90	53	121	64	185
1967	1	3	30	12	92	51	123	66	189

Syphilis

In spite of the threefold rise in incidence for the country as a whole which has occurred in the past few years, this still remains a comparatively rare disease. Four cases were seen in the Cheltenham Clinic in 1967, two in the early, infectious stage and two in the late stages. Neither of the two early cases were Cheltenham residents and both acquired the disease elsewhere in Great Britain. No case of infantile congenital Syphilis was seen during the year.

Gonorrhoea

The average National increase of approximately 12% every year is not reflected in the Cheltenham figures for the past two years. The prompt tracing of contacts with the excellent co-operation of the Superintendent Health Visitor has undoubtedly played a significant part in containing the incidence in the City.

TABLE 2. Incidence of Gonorrhoea—Cheltenham 1961-1967.

Year	New Cases
1961	23
1963	30
1965	69
1966	39* (5)
1967	42* (13)

*The figures in brackets indicate the number of patients included in the total who were not residents of Cheltenham.

ANNUAL RETURN OF FOOD POISONING NOTIFICATIONS

There were five notifications of food poisoning during the year.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

Notifications of tuberculosis during the period from 1st January to 31st December, 1967 :—

Respiratory (Males)	...	...	...	...	...	...	...	10
Respiratory (Females)	...	...	...	...	...	...	...	2
Non-respiratory (Males)	...	...	...	...	...	...	...	3
Non-respiratory (Females)	...	...	...	...	...	...	...	2

Deaths from tuberculosis during the above-mentioned period :—

Respiratory (Males)	...	...	...	...	...	...	...	1
Respiratory (Females)	...	...	...	...	...	...	...	1
Non-respiratory (Males)	...	...	...	...	...	...	...	—
Non-respiratory (Females)	...	...	...	...	...	...	...	—

Death Rates

The tuberculosis death rates for Cheltenham during 1967 were as follows :—

Pulmonary Tuberculosis		0.03	} Per 1,000 of Population
Non-Pulmonary Tuberculosis		0.00	
		0.03	
Comparative Figures	England and Wales	Total 0.04	

There were only 12 new cases of respiratory tuberculosis notified during the year. There were 20 in 1966. There were 2 deaths from the disease compared with 3 the previous year. The incidence of the disease in the town and the death rate continues to be very low, but one of the difficulties in reducing the new notifications further is illustrated by Dr Knights' account, in his report, of non co-operative patients.

The following report has been received from Dr F. J. D. Knights, M.D., M.R.C.P., Senior Chest Physician, North Gloucestershire Clinical Area.

In 1967, 17 new cases of tuberculosis in the Borough were handled in the chest clinic services.

12 of these were cases of phthisis, 3 minimal and 9 moderately advanced. The remaining 5 were non-respiratory cases.

7 of the cases were referred from the general practitioners, 4 from Mass Radiography and 6 by other hospital departments.

The Register of persons notified as suffering from respiratory tuberculosis in Cheltenham stands as follows :—

RED, infectious	9
GREEN, non-infectious	151

The register reflects 22 cases of non-respiratory tuberculosis, 9 men, 11 women and 2 children.

Contact Examinations

Contact examinations arising out of 16 notifications in Cheltenham in 1967. A further 1 notification did not produce any new contacts, being herself a contact, and was therefore not included in establishing the averages given below :

Average number of contacts per case :	Listed	6
	Seen	5

This does not include 11 adults and 5 children out of the clinical area who were referred to other Chest Clinics.

Adults

Number called : 71 Number attended : 51 = 72%

4 of these were already Chest Clinic cases. No case of significance was found among these contacts of 1967 notifications.

It is, however, of interest to report that the notified contact mentioned above was a further victim of the then unestablished source case in the family mentioned in last year's Report, making the 10th known case. The father of the family concerned, reported as having a cough, had persistently refused examination, but finally, at the end of 1967, he attended the Mass Radiography Unit, and was found to have advanced bilateral pulmonary tuberculosis. He is now in Hospital.

Children

Of 31 children called, 4 did not attend at all, 1 reported for tuberculin testing and was negative, but failed to return later for B.C.G. vaccination, 1 was tuberculin positive, and is being kept under observation at the clinic, and 1, a 5 year old contact of his father, was notified as a primary infection.

The remaining 24 were healthy, and are analysed as follows :—

Tuberculin	+ ve,	age 12-16, for M.M.R. follow-up	...	...	1
"		5-12, to G.P. and H.V., for observation...			1
"		previously B.C.G.'d as contacts, and re-checked			4
Tuberculin	— ve	successfully B.C.G. vaccinated	...	...	16
"		awaiting B.C.G.	...	...	2

HOUSING

The following is the number of cases dealt with during the year :

Number of cases rehoused because of tuberculosis	...	...	Nil	(1)
Number of cases rehoused from houses on which a Demolition or Closing Order was operative or certificate of unfitness issued	...	...	...	14 (23)

The 1966 figures are shown in brackets.

REGISTRATION AND INSPECTION OF NURSING HOMES SECTIONS 187 - 194. PUBLIC HEALTH ACT, 1946

At the end of 1967 there were 5 Nursing Homes on the Register.

The total number of beds available at the end of the year was 70 : no beds are now available for maternity cases.

Private nursing homes in Cheltenham still provide a most valuable addition to the accommodation available for sick persons.

Many of the homes provide mainly for old persons and help in no small way to solve a problem which yearly becomes more difficult.

Visits were paid to all Nursing Homes on two or more occasions during the year.

The number of private registered nursing homes in the town is being rapidly reduced. Compared with 10 years ago the number has been reduced by half. For a number of years there has been no private maternity accommodation.

SECTION II

National Health Services Act, 1946

PERSONAL HEALTH SERVICES

SECTION 21

Health Centres

The Health Centre at Hesters Way is providing adequately for the needs of the area and following extensions in recent years should continue to do so. As already stated there is no prospect of providing dental facilities until the economic position improves.

The Hesters Way Health Centre was the sixth Health Centre to be opened in the country in 1955. It was built at the request of local general practitioners. Since then progress has been slow and to date only thirty-two Health Centres have been built by Local Health Authorities since 1948. However, the Minister of Health is now encouraging the building of Health Centres irrespective of the present financial restrictions and at the moment eighteen are under construction throughout the country, and a further thirty-one have been approved. It is estimated that three hundred more Health Centres will have been built by 1976.

The trend in Cheltenham has been the extension of group practice in suitably adapted premises with the attachment to the practice of Health Authority staff e.g. Health Visitors and District Nurses. This kind of medical practice which is developing very successfully could well be fully implemented before 1976, and seems to be the choice of family doctors in the town, at least no group of family doctors have requested the provision by the Local Health Authority of further Health Centres.

The following table shows the numbers attending the Centre during the year:—

General Practitioner Consultations	Treatment and Casualties	Child Welfare	Orthopaedic	Total
18,690	3,797	4,296	72	26,855

SECTION 22

Care of Mothers and Young Children

Child Welfare Centres

These are held weekly throughout the town as follows :

St. Michael's Hall, Whaddon Road	...	Thursday
St. Paul's Hall, Swindon Road	... ..	Tuesday
Hesters Way Health Centre	... ..	Tuesday and Thursday
Bethesda Church Hall	... ..	Wednesday
Highbury Church Hall	... ..	Tuesday
Leckhampton Church Hall	... ..	Friday
Gloucester Road Methodist Sunday School		Wednesday
Coombe Glen, Alma Road	... ..	Thursday

Toddlers clinics for older children are held separately or in conjunction with these Centres.

Records of attendances are as follows :

No. of Centres provided	...	...	...	...	...	8
No. of Children born in 1967 who attended a Centre during the year	...	...	...	...	...	886
Total No. of Children who attended a Centre during the year	...	...	...	...	...	3,327

Total attendances made :

Children born in 1967	...	...	...	...	...	6,441
Children born in previous years	...	...	...	...	...	10,996

The nine Child Welfare Sessions held each week are still well attended and continue to supply a need appreciated by nursing mothers. Each centre is run by a voluntary committee of ladies who put in a great deal of work throughout the year to make the Centres so popular with the mothers. Their efforts are very much appreciated by the Health and Welfare Committee.

An important publication on this subject was issued during the year, the Sheldon Report on Child Welfare Centres, submitted to the Minister by a sub-committee of the Standing Medical Advisory Committee of the Central Health Services Council, under the chairmanship of Sir Wilfred Sheldon, K.C.V.O., M.D., F.R.C.P. The terms of reference of this committee was "to review the medical functions and medical staffing of child welfare centres and to make recommendations". Among other important recommendations, the sub-committee recommended that statutory responsibility for the care of the mother and child should continue to remain with the local health authority, with the Medical Officer of Health responsible for the administration and co-ordination of these services. The need for special training of the medical officers in charge of child welfare centres was stressed and their co-operation with doctors in group practice, in Health Centres and health visitors attached to general practices. The sub-committee had no doubt about the need for a Child Welfare, or as they preferred to call it, a Child Health Service, in the future, with a greater involvement of the family doctor.

Welfare Food Centre

The distribution of welfare foods, National Dried Milk and vitamin supplements, is carried out from the Welfare Food Centre in Clarence Street and from all Child Welfare Centres in the Borough.

Family Planning Clinic

The Cheltenham Branch of the Family Planning Association who act as the Council's Agents for the provision of this service, continues to run well attended sessions in the School Clinic premises. Requests made to the Health Department, on medical grounds, are referred to the Family Planning Association.

An extension of the service was started during the year at the Hesters Way Health Centre, a weekly clinic for women who wish to avail themselves of the latest contraceptive appliance now in use, the intra-uterine device. The clinic is staffed by a doctor and nurse.

Care of the Unmarried Mother and Child

Arrangements for the care of the unmarried mother are provided on behalf of the Council by the Cheltenham Deanery Association for Social Work. This service is grant-aided by the Council. The number of cases dealt with in Cheltenham during the year was 120. There were 150 illegitimate births out of a total of 1,242 births, a percentage illegitimate birth rate of 12.1% representing an increase on the previous year (10.6%).

St. Catherine's Home in Cheltenham provides accommodation for the admission of unmarried mothers, but they are also admitted to similar homes run by the Diocesan Moral Welfare Association in other parts of the country.

Dental Treatment for Expectant and Nursing Mothers

The following report has been supplied by Mr P. Stone, L.D.S., Area Dental Officer.

A. INSPECTIONS

	Examined	Needing Treatment	Treated
Expectant and Nursing Mothers ...	12 (30)	12 (27)	12 (24)
Children under 5 years	79 (102)	62 (85)	68 (86)

B. TREATMENT PROVIDED

	Scaling and Gum Treatment	Fillings	Other means of Conservation	Extractions
Expectant and Nursing Mothers	1 (5)	4 (34)	0 (0)	20 (65)
Children under 5 years	0 (1)	99 (112)	26 (20)	118 (127)

	Full Dentures	Partial Dentures	X-Rays
Expectant and Nursing Mothers	2 (5)	0 (5)	2 (2)
Children under 5 years	0 (0)	0 (0)	1 (1)

General anaesthetics administered :

(a)	By doctors for expectant mothers	...	...	...	3
	By dental surgeons for expectant mothers	...	...	...	—
(b)	By doctors for pre-school children	...	...	...	28
	By dental surgeons for pre-school children	...	...	...	21

The staff shortage which has prevented an extension of our services to expectant and nursing mothers and especially pre-school children showed no sign of improvement during the year. Inspection and treatment continue to be provided on demand only. Many mothers, however, still do not realise that treatment is available for very young children and although we offer the service to those who come with older children or needing emergency treatment, it is not practicable to seek work when we cannot cope effectively with the amount of work which we already have in the schools service.

The ways, then, in which we hope to cope with the problem of dental decay in very young children become long term policies and, in fact, become the policies of prevention rather than treatment.

We can base preventive policies on two major issues which must be complementary to be fully effective.

(1) Adjustment of the fluoride in the water supply to an acceptable level, (i.e. raising it from 0.2 p.p.m. to 1.0 p.p.m.) This will give children teeth, which, throughout their lives, are intrinsically resistant to decay.

(2) An effective Dental Health Education Scheme so that full advantage is taken of the first policy.

These two must, of course, be backed by an efficient treatment service. As things stand at the moment we have neither of the two basic requisites. With the opening of our new clinics we hope to establish the third necessity which, at best, by itself can only repair the damage. Is it too much to hope that one day enlightenment will dawn and it will be realised that prevention really is better than cure.

Orthopaedic Clinic

An Orthopaedic Clinic is held on three occasions each month where children under five years can have postural and other defects remedied. Two sessions are held in the same premises as the School Physiotherapy Clinic and the third at the Health Centre.

Care of Premature Infants

The fall in the number of premature births, to which reference was made in last year's Report has continued, and the number of those premature infants within the lowest weight range, and for whom the chances of survival are poor, remains equally low. This is reflected in the much more satisfactory infant mortality rate in this and recent years.

No. of Premature Live Births notified :

(a)	In hospital	...	...	...	...	...	...	85
(b)	At home	...	...	...	...	...	...	6

No. of Premature Still Births notified :

(a)	In hospital	...	...	...	...	...	...	9
(b)	At home	...	...	...	...	...	...	—

Notifications of Births

The following table shows the actual number of births notified in Cheltenham during the period 1st January to 31st December, 1967, and the number is adjusted by any notifications transferred in or out of the area :

	Adjusted Live Births	Adjusted Still Births	Total Adjusted Births
1. Domiciliary	211	1	212
2. Institutional	1,063	12	1,075
3. Total	1,274	13	1,287

Birth notifications are much the same as the previous year which showed an appreciable fall on 1965. The fall in domiciliary confinements continues, although there has been a reduction in the number of hospital confinements.

Day Nurseries

Both nurseries continue to supply a need in the town especially the Whaddon Road nursery where there is always a waiting list. If the Swindon Road nursery were as conveniently situated both nurseries could support each other in reducing the waiting list, but this will not happen until the Swindon Road nursery is replaced by the proposed new nursery on the Gloucester Road site. The economic climate, however, is still unfavourable, and there is as yet no prospect of building the new nursery.

The following table shows children on register and average daily attendances at the Nurseries during the year.

	Number of approved places	Number of children on the register at the end of the year	Average daily attendance during the year
Swindon Road Day Nursery	40	33	29
Whaddon Road Day Nursery	50	54	45

Nurseries and Child Minder Regulations Act, 1948

With no nursery school accommodation available to the education authority and places in both day nurseries restricted to the priority classes i.e. needy cases, more and more day nursery places are being provided privately every year. Child minders either in their own homes or on other rented accommodation provide 302 places for children under five years in the form of day nurseries, nursery schools or play groups.

All premises where children are looked after for reward are inspected initially for registration and at frequent intervals thereafter, with regard to suitability. In addition registration cannot be considered by the Health Committee until planning permission is granted by the Council. Also an inspection and report by the Chief Fire Officer is required and any recommendations made must be carried out. The same applies to recommendations made for reasons of home safety.

Persons applying for registration to look after young children are considered with regard to their fitness and suitability. They and their staff are required to produce evidence of a satisfactory chest X-Ray examination.

A quarterly report on registered child minders is made to the Health Committee.

On 31st December, 1967, there were 16 child minders looking after 172 children and 5 Day Nurseries/Play Groups looking after 138 children. Child Minders therefore provide a substantial number of places but largely for parents who wish to take up employment, and do little to relieve the pressure on our Day Nurseries where only priority groups are admitted such as children of unmarried mothers and of divorced or separated parents, sudden illness or removal to hospital of the mother, and other cases where genuine need is established.

National Society for the Prevention of Cruelty to Children

Very close co-operation is maintained between the Health Department and Senior Inspector Hammer, of the N.S.P.C.C. Frequent joint visits are made to homes, either on the initiative of Inspector Hammer or the Health Department and these visits are of mutual benefit. I would like to record my appreciation of the many instances in which Inspector Hammer has given valuable assistance both to the Health Department and the School Health Service in the welfare of children.

Senior Inspector Hammer attends the co-ordinating committee concerned with the problem families in Cheltenham which meets every two months in the Municipal Offices.

Problem Families Committee

As reported last year this new committee continued to meet every two months throughout the year, under the chairmanship of the Medical Officer of Health. The committee has been well supported by all the officers concerned and approximately a dozen problem families have been under constant review as well as many more who have required shorter periods of supervision. Many cases have been helped both by the officers concerned and by reference to other sources of help both statutory and voluntary. The co-ordination of effort achieved by the committee has resulted in cases being dealt with expeditiously by those best qualified to do so, and has eliminated much duplication of work.

SECTION 23

Midwifery Services

Ante-Natal Clinics

Ante-natal Clinics are held at the Cheltenham Maternity Hospital and Hesters Way Health Centre. At the Health Centre the clinics are run by family doctors and midwives. At the Maternity Hospital, hospital medical staff, family doctors and midwives are in attendance. At both clinics, health education activities are run by our health visitors, who give talks or individual instruction to expectant mothers. Also at both clinics relaxation classes are held and are conducted by a qualified physiotherapist.

Maternity beds for hospital confinement are allocated for medical and social reasons. Each applicant is visited by a midwife who makes an assessment of the need for institutional confinement in all cases where the reason

for the application is other than medical. All institutional confinements take place at the Maternity Hospital or the Victoria Home, but occasionally when accommodation is over-booked, some cases are transferred to the Cirencester or Stroud Maternity Hospitals.

Domiciliary Midwifery

Although operating under establishment an adequate domiciliary midwifery service has been provided throughout the year by six full-time and two part-time midwives. The number of babies born at home continues to fall to such an extent that we will have to consider limiting the number of midwifery pupils we can accept for training owing to the difficulty in providing the required training on the district. The hospitals on the other hand are coping with an increasing number of admissions, many of whom, where suitable home conditions exist, are being discharged early, sometimes within 48 hours. Much of our domiciliary midwives' time is spent dealing with the post natal care of these cases.

SECTION 24

Health Visitors

The work of the Health Visitor is intimately connected with so many branches of the work of the Local Authority Health Services that the scope of her work is increasing year by year, from the care of the newly-born child to the care of old people. She is also playing an important part in the training of student Health Visitors attached to the Health Department from the local training school. For this purpose three of our Health Visitors have undergone special training and are now designated Field Work Instructors. Their latest and very important role is attachment to general practices in the town, where they work with the family doctor and confine themselves exclusively to his patients instead of, as formerly, working within a district of the town with the patients of possibly half a dozen or more practices. This system works to the advantage of both patient and doctor and has proved very popular with the Health Visitors giving them an added personal interest in their work. It also makes for much better co-operation between the Health Department and the family doctor and avoids duplication of work in both spheres. The further development of this scheme is only limited by the need to economise in staff during the present period of financial restriction. Five Health Visitors are now attached to general practices in the town. They are not working exclusively with the general practitioner but continue to carry out other duties connected with the Local Authority Health Services, including the School Health Services.

The following is a summary of the work done by the Health Visitors during the year and includes work done on attachment to general practitioners :

Number of children visited during the year	...	...	...	6,238
First visits to infants under 1 year of age	...	...	...	1,477
Total visits to infants under 1 year of age	...	...	...	4,591
Visits to children aged 1—5 years	...	...	...	11,698
Visits to expectant mothers	...	...	...	214
Tuberculosis visits	...	...	...	200
Investigations of Social Conditions for Hospitals, visits to sick persons, old people, etc.	...	...	...	2,041
Number of attendances by Health Visitors at Clinic Sessions				910

SECTION 25

Home Nursing

The Home Nursing Service is based on Victoria Home and comprises a Superintendent with 18 full-time and 2 part-time Home Nurses. These numbers include 3 full-time male nurses and 1 full-time nurse who is responsible for the domiciliary nursing care of children. The male nurses and the children's nurse cover the whole town, but the other nurses work in specified districts. Nursing duties include all illness occurring in the home and also the care of patients discharged from hospital. Much time is taken up with the nursing care of the elderly, many of whom would have to be admitted to hospital but for the domiciliary care provided by the Family Doctor, the Home Nurse and the Home Help, with the very useful addition of the Meals on Wheels Service provided by the Old People's Welfare Association.

Following the success of the attachment of Health Visitors to general practices a similar scheme has been started with our Home Nurses. Two nurses have already been attached, and it is hoped to develop the scheme further. It has already proved successful and popular.

SECTION 26

Vaccination and Immunisation

Vaccination against Smallpox

Children are not normally vaccinated against smallpox until after the first birthday. The majority of these vaccinations are done by family doctors and doctors at Child Welfare Centres. 736 children were vaccinated during the year, 706 between the end of the first year and the end of the fourth year. Vaccinations done outside this age range are usually for a special reason, e.g. family going abroad. Mothers are continually encouraged to have their children protected because of the ease and rapidity with which Smallpox can be imported from abroad.

Vaccination against Diphtheria, Whooping Cough and Tetanus

Protection against these diseases begins between the 2nd and 3rd month, and with the exception of Whooping Cough, is repeated at various intervals until the child is eight. Vaccination is done by a triple (combined) vaccine.

The following figures show the number of completed courses carried out during the year and the number of booster doses :—

	<i>Diphtheria</i>	<i>Tetanus</i>	<i>Diphtheria/ Tetanus</i>	<i>Diphtheria/ Whooping Cough/ Tetanus</i>
Complete Courses	2	97	161	1,147
Boosters	386	253	1,293	868

Vaccination against Poliomyelitis

Protection against Poliomyelitis is given at the same time as the triple vaccine but is given by mouth.

During the year a total of 1,272 children between the ages of 6 months and 15 years received a complete course. Booster doses covering this age group numbered 591.

Vaccination against Tuberculosis (B.C.G.)

Details of B.C.G. vaccination will be found in the Report on the School Health Service.

All these protective procedures are going on throughout the year with results that are too well known to need repetition. It is the Health Visitor's job to encourage parents, especially the forgetful and the apathetic, to bring their children for protection either to the family doctor or the child welfare clinic. Next year these various injections will be supplemented with protection against measles.

SECTION 28

Prevention of Illness, Care and After-Care

Tuberculosis

At one time, not so many years ago, most after-care work was concerned with tuberculosis. Happily this is no longer the case owing to the much reduced incidence of the disease. Only about a dozen patients in the town receive free milk supplies from the Council as they are entitled to do if their income falls below a certain level. Assistance is also available through the Tuberculosis Care Committee, a voluntary body which over the years has helped considerably, and still helps patients who are in need. Health Visitors visit patients discharged from hospital and trace contacts of infectious patients for referral to the Chest Physician.

Incontinence Pads

The issue of incontinence pads has now proved its value and has become a permanent part of the nursing services provided from Victoria Home.

Cervical Cytology

The cervical cytology service has continued to function successfully throughout the year in the school clinic and our medical nursing and clerical staff have been able to meet all requests for examinations with an increase in facilities available at the hospital laboratory where the smears are examined. We have been able to increase the clinic sessions from one to two per week, thereby considerably reducing the waiting time.

The Ministry of Health has not yet authorised the availability of this service to applicants under thirty-five years of age but since we increased the clinics to two per week, we find sometimes that we do not have enough applicants in spite of frequent advertising in the local press. We do not, therefore, refuse any applicants because of age but keep their names on a separate waiting list for inclusion in the clinic session whenever the numbers fall below the normal weekly complement.

General

The general work of the Health Department in the prevention of illness care and after-care, although a delegated function under the scheme, is very much a joint effort between our own staff, Health Visitors, Home Helps, District Nurses, etc., and other bodies, such as the Ministry of Social Security, Women's Voluntary Service, Red Cross, the County Welfare Department and the Tuberculosis Care Committee already mentioned. The

Hospital Authority and the Family Doctors are very closely associated in this work especially as it concerns the care of patients discharged from hospital and the welfare of old people, and altogether it is this co-operative effort which achieves results. Cheltenham is also very fortunate in the amount of voluntary effort put into this work. I need only mention the Local Spastics Committee who run their own excellent school for spastic children, the Cheltenham Branch of the Infantile Paralysis Fellowship, the Cripples' Aid Committee, the Muscular Dystrophy and Multiple Sclerosis Group, and the well-known and greatly appreciated work done by the Committee who arrange for the weekly swimming sessions for handicapped persons at Alstone Baths. The Cheshire Home in the town is doing wonderful work.

Sick room equipment is available on loan when required for patients being nursed at home. Large items, such as wheel chairs, etc., can be obtained from the Red Cross at a small charge.

Details of all the above services and many others concerned with the health and welfare of the community, have recently been published in a booklet "Borough of Cheltenham Public Health and Social Services" which has been distributed to various organisations in the town and is available at the Health Department.

Chiropody Service

The Cheltenham Old People's Welfare Association provide a chiropody service for the town on the Council's behalf. The service is becoming more and more popular and is obviously supplying a genuine need. There is still a shortage of chiropodists and the service must still be confined to three priority classes, the aged, the physically handicapped and expectant mothers.

The following is a summary of the work carried out during the year :

Number of treatments at clinics and centres	...	...	...	1,248
Elderly	...	...	...	1,238
Physically handicapped	...	...	...	10
Expectant Mothers	...	...	...	—
Domiciliary (at patient's house)	...	...	...	68
Domiciliary at General Hospital	...	...	...	1
Number on Register—December 31st, 1967	...	...	...	604
Number awaiting appointments at December 31st, 1967	...	...	...	216

SECTION 29

Home Help Service

The Home Help Organiser and her staff have as usual had a very busy year. Invariably each year shows an increase in demand and the main difficulty in the running of the service is the recruitment of an adequate number of suitable home helps. At the end of the year we were employing 98 home helps.

The Health and Welfare Committee accepted my request for the provision of six mopeds and these will be available in the near future. At least a small part of the service will then be on wheels and this will mean more time spent on help and less on travelling.

The following is a summary of the work done during the year :—

	Maternity	Chronic Sick	General Sickness	Old Age	Total
Families Helped	98	34	159	449	740

MENTAL HEALTH

Mental Illness

During the year the Department received 101 referrals from a variety of sources. 51 were requests for after-care for patients discharged from hospital, 19 from General Practitioners, 9 from the Police and Courts and 22 from other varied sources. At the end of the year 87 clients were receiving after-care support from the Department.

Although the majority of admissions to hospital are now on an informal basis, admissions which directly involved the Mental Welfare Officers numbered 114, of which 98 were on a compulsory basis.

The Secretary and members of the Gloucestershire Association for Mental Health gave even greater support to this Department, particularly with direct financial aid and help with clothing from the Nearly New Shop.

Mental Subnormality

The number of new referrals from the Education Department was 10, bringing the total number of persons receiving care and guidance to 149. Of these, 2 remain under the Guardianship of the Borough Council, 3 are resident at "Merrowdown" hostel, and 36 are in full-time employment. There has been a significant increase in the number of informal referrals, particularly of children under five years of age, the total being 13. This points to an increasing trend of earlier diagnosis and consequent help to these children and their families.

There were 12 admissions to hospital for short-term care, 2 for permanent care, and the waiting list for permanent care is now 11.

The North Gloucestershire Society for Mentally Handicapped Children continues to give great help to the Department, particularly with regard to supporting Mr Brian Pugh and his helpers at the Spa Social Club. This Club is probably unique with regard to the scope of its membership and its programme, and its value to the members cannot be over-estimated. During the Spring a party was taken on a weekend camp to Churnside Adventure Site, and its undoubted success will stimulate a more adventurous programme in the future. This Club relies heavily on its Committee and helpers, particularly the Lions Club who provide such an excellent transport service.

Further use has been made this year of the Community Service Volunteers under the guidance of Miss Elizabeth Jenkyn and their help and interest is much appreciated.

Eildon Junior Training Centre

The number of children at this centre is one hundred and seven, and there is now a waiting list.

Swimming activities continue at the Alstone Baths and are proving of great value.

Physiotherapy and Speech Therapy Sessions continue under the guidance of Mrs H. Sarma and Miss C. Newlove.

Two members of Staff are attending the Training Course for Teachers of Mentally Handicapped Children. During the year some eight Students from courses have gained their practical experience at Eildon.

St. Paul's College students continue to help in Social Training.

A Tutor and students from St. Mary's College organise a Music and Movement Group each week.

The Youth Community Service continue to visit and their services are most useful.

Adult Training Centre

A further nine trainees have been placed in full-time outside employment during the past twelve months. This makes, since we opened this centre four years ago, a total of fifty trainees who are now earning their own living working in open industry.

There is still a greater demand for places than there are vacancies, resulting in a waiting list building up and, as Phase II of the extension is not due to commence until 1969-1970, some delay must be expected in the admission of new applicants.

A regular flow of contract work from local factories still continues and three more new firms now entrust us with their work. This means that, with the twelve firms we now do work for, our training facilities continue to improve and that a greater variety than ever of skills have to be taught. When we compare the value of work done during the past year, £3,620, against the £600 we did during the first year since we moved to our present premises, some progress can be claimed. Progress, however, is not by any means judged solely on financial turnover.

Ten of our trainees attend our further education and social training class. This class is held for two hours on three days per week under our qualified teacher of the Educationally Sub-normal. The Domestic Unit now functions and here groups of female trainees are taught the skills of washing, ironing and plain cooking. All our female trainees have trained to do turns on the duty of making tea and taking the tea trolley around during the morning break.

In conjunction with the North Gloucestershire Society for Mentally Handicapped Children, a trip to a Circus was organised and a small group of trainees were taken to a Christmas Party, at the invitation of the Gloucester City Society for Mentally Handicapped Children.

Parties of Health Visitors, Midwives and Students from the various training courses have visited the Centre and students from the N.A.M.H. Diploma Courses have again been sent to us for their practical training placements.

Once again, we must thank all those who have helped in any way for the successful running of the Centre. Special thanks must be given to our friends in industry for their continued support and I would like to thank the Training Centre Staff for their loyal devotion.

North Gloucestershire Society for Mentally Handicapped Children

Once again we are sincerely grateful to the Society for their continuing interest and generous assistance during the year. This can be assessed not only in financial terms but in their more important contribution to the continued welfare and happiness of the trainees. Their keen desire to see Eildon replaced by a modern purpose built Centre is fully shared by the Health and Welfare Committee and no opportunity is being lost to impress on the County Authority the need for modern premises with adequate facilities both for trainees and staff.

WELFARE SERVICES

Residential Accommodation

Under Section 21 (1) (a) of the National Assistance Act, 1948, the Welfare Department of the County Council is responsible for the provision in Cheltenham of residential accommodation "for persons, who by reasons of age, infirmity or any other circumstances, are in need of care and attention which is not otherwise available to them".

Mr H. D. Nichols, County Welfare Officer, has kindly supplied the following information concerning the number of Cheltenham old people in residential accommodation in the area, as at 31st December, 1967 :—

Home	Men	Women	Total
Arle House	22	33	55
Sunnyside	25	44	69
Orchard House	4	22	26
East Court	6	8	14
Grevill House	8	10	18
Ellerslie (Home for Blind)	3	32	35
	<hr/> 68	<hr/> 149	<hr/> 217

Number of Cheltenham old people in residential accommodation elsewhere in the County :—

Home	Men	Women	Total
Atherton Close, Shurdington	—	9	9
East View, Stow-on-the-Wold	1	1	2
Ferney Hill, Dursley (Home for Blind)... ..	—	3	3
Frome House, Yate	1	1	2
Horsebere House, Brockworth	2	9	11
Newton House, Cadbury Heath	—	1	1
Northleach Hospital	1	2	3
Puckrup Hall, Twyning	4	11	15
Ridgewood, Chipping Sodbury	—	5	5
The Willows, Eastington... ..	2	5	7
Westbury Hall, Westbury-on-Severn	—	5	5
	<hr/> 11	<hr/> 52	<hr/> 63

There were 10 men from the Cheltenham area on the waiting list for admission to Homes for the elderly, 65 women and 1 married couple, all of whom are living within the area of the Cheltenham Borough Council. This totals 77 as at 31st December, 1967.

The above figures show a decrease in the number of people from Cheltenham in old people's homes. The number for the year was 280 compared with 312 in 1966. Not all Cheltenham old people can be accommodated locally, but out of the total of 280, only 63 (23%) are not in homes in the Cheltenham area, and in some of these cases it is advisable both for the sake of the old person and other members of the family for accommodation to be found at some distance from Cheltenham.

The waiting list of old people in the town awaiting admission to old people's homes has gone down from 112 in 1966 to 77 in 1967. However, this is still a large number and would justify the provision of additional residential accommodation for old people in Cheltenham.

Temporary Accommodation

Under Section 21 (1) (b) of the National Assistance Act, 1948, the Local Authority has a duty to provide temporary accommodation "for persons who are in urgent need thereof, being need arising in circumstances which could not reasonably have been foreseen, or in such circumstances as the authority may in any particular case determine".

This type of accommodation is provided by the County Welfare Department at the hostel at Newent and in Cheltenham.

Welfare of Old People

Visiting of old people is undertaken by the Health Visitors working in close contact with other voluntary and statutory agencies. A register is kept of all old people in the town visited for the first time and their needs ascertained and recorded for future reference. The Health Visitor advises and provides help where she can or makes arrangements for other help to be provided. In cases where residential accommodation is considered necessary, the case is referred to the Area Welfare Officer, in Cheltenham.

We also work very closely with the Cheltenham Old People's Welfare Association who are also responsible for providing the Meals on Wheels and the Chiropody Service both very much concerned with old people.

Removal to Suitable Premises of Persons in need of Care and Protection

(National Assistance Act, 1948, Sec. 47 and Amendment Act, October, 1951)

Three old people have been compulsorily removed from their homes during the year, either to hospital or to old people's homes, in their own interests. This is a measure which is only taken as a last resort when it becomes clear that the case is beyond the scope of the domiciliary services. Fortunately there are not many such cases. After admission, house and effects become the responsibility of the Area Welfare Officer and the old person's interests are safeguarded. Regular reports are received from the hospital or old people's home with a view to discharge, but unfortunately when conditions ultimately make compulsory removal necessary, it is seldom that the old person is able to return home again unless there is a relative or friend willing to take over the care and responsibility.

Welfare of the Deaf

242 visits were made in the Borough during the year. 8 infant and pre-school children were screened of whom 2 were referred for clinical testing. A total of 32 new cases were registered including 4 school children who were fitted with aids and passed on to the peripatetic teaching staff for extra help in school.

The Deaf and Hard of Hearing Club continued to meet fortnightly at Dowty House until November, when the venue was changed to the United Services Club premises, and facilities are available every Monday evening.

The Club is very grateful to the United Services Club's sponsors for allowing their premises and facilities free of charge.

The Welfare Officer continued to visit housebound deaf patients in their own homes for testing and training with aids.

4 young adults attended the Auditory Rehabilitation Class at Cheltenham General Hospital on the 2nd and 4th Tuesday evenings each month.

Welfare of the Blind

During the year nearly seventy possible new cases were reported from various sources for investigation.

Registers 31.12.67 — Blind 190 Partially-Sighted 42.

Routine visits were made to Blind and Partially-Sighted people in their homes, also to those in Hospitals and County Homes. Lessons were given in rehabilitation and mobility, Braille and Moon, also in Handcrafts.

The Social Club met regularly at Highbury on Wednesday afternoons; we were again most grateful to our Voluntary Helpers who contributed so much help with all Club activities.

All those who were able to accept invitations from friends enjoyed Parties, Concerts and outings; we were especially grateful to Toc H and the Inner Wheel for their kind and generous entertainments.

The Deaf-Blind people appreciated their quarterly meetings with friends in the County; one man attended the Western Region's residential course at Weston-super-Mare.

Gloucester County Association for the Blind assisted with holiday grants and, as always, supplied extra help and support when needed.

Welfare of the Physically Handicapped

The number of physically handicapped on the register on December 31st, 1967, was 473.

Occupational Therapy Centre

This Centre meets each Wednesday afternoon at Whaddon Boys' Club, Dart Road, where the staff are most helpful. Miss Warren (Member of the Association of Occupational Therapists) continues to have the help of a part-time Occupational Therapist, and the Centre has proved so popular that there is now a waiting list. 25 attend regularly and, of these, 18 live in the Cheltenham Borough. Those not able to attend the Centre receive domiciliary occupational therapy, including aids to daily living and instruction in craftwork.

British Red Cross Club

This club for the disabled meets on the first and third Tuesday afternoon at the old Ambulance Headquarters, Gloucester Road, where Mrs Sadler and her many helpers provide social activities and an excellent tea. Numbers continue to increase and membership has reached 32. Coach trips and outings to other clubs were much appreciated during the summer months. This club is filling a very real need and is now running at full capacity.

Cheltenham Cripples Aid

The Committee, under the Chairmanship of Mrs Bastin, continues to help many severely disabled people, an average of 60 cases being visited each month. During the year the Committee has increased its membership to cope with the increasing demand for assistance and the provision of amenities not available, through the Health Service.

In October a Wheelchair Ambulance with hydraulic lift, was sponsored by this Committee who have undertaken to give an annual donation towards the upkeep of the vehicle and provide special gadgets for it. The Cheltenham Round Table and Lions Club raised money to go ahead with this project, which is being administered by the Cheltenham Association for the Transport of the Disabled.

Proposed Sheltered Workshop

Work on this project has been postponed owing to the present financial position but some delay would in any case, have been inevitable, following refusal of planning permission on the site referred to in last year's Annual Report, in Moorend Road. Another site is being selected and the latest information from the Ministry is that half the money required will be available for the financial year commencing 1st April, 1969, the other half being available as far as is known on 1st April, 1970. There is a possibility therefore, that the Sheltered Workshop may be completed towards the end of 1970.

Meals on Wheels Service

This service has been operated successfully during the year in the capable hands of the Old People's Welfare Association providing a much needed and highly appreciated help for old people. The number of meals provided during the year was 13,622. (Previous year 11,960).

HEALTH EDUCATION

The Health Education work has been expanding as the health visitors enter into their 51st year in the field of preventive medicine in the Borough. What has been achieved will be observed by the extent of the work done and talks given to such a variety of groups. The main object of Health Education and Social Advice is to encourage and promote the attainment of complete health within the family group.

During the year we commenced courses in the Secondary Modern Schools, incorporating all aspects of child care and home safety, mothercraft, housecraft, budgeting and social services, and how to live a healthy, happy life, emphasising the personal responsibilities of each individual towards the community in which he lives. Much hard work has gone into the preparation of these talks by the health visitors concerned.

The scope and influence of the health visitor is spreading. Talks and discussion groups have been arranged with students of St. Paul's College and the first year student nurses of the General Hospital. In addition to these courses a Study Day was arranged for Sisters and Staff Nurses incorporating the Health Inspectors work, and this new form of liaison proved to be very beneficial and constructive.

With more General Practitioners and Health Visitors working in general practice attachments, the preventive aspect of the work is being extended to the whole family, as well as to the special sections of the community. Regular talks, discussions and examinations, including relaxation classes, have been given to the girls of a remand home, a mother and baby home, and the youth groups of the town, as well as to adult meetings and these have been appreciated by these societies.

The number of talks given during the year was 495, with an approximate attendance of 4,989 people. The subjects covered a wide range from food handling to aspects of family life and preventive measures against infectious diseases, dangers of smoking, venereal diseases, and how to keep healthy over 60.

Each month the child welfare centres have a set health education project suggested for talking points and discussions. These included Dental Hygiene for the preservation of teeth, home safety with its many facets for the safeguarding of the family and community hygiene with its relationships to other people, allied with preventive measures for the safety of the community from infectious diseases.

During the year two National Refresher Courses, for midwives and school nurses respectively, have taken place in Cheltenham, and the Medical Officer of Health for Cheltenham in conjunction with the Health Visitors took a very active part in the talks and discussions, as well as arranging observation visits in the promotion of health education activities.

Healthy living starts with healthy thinking along the lines of positive health. As Health Education starts before birth and continues through the "Seven Ages of Man" people are encouraged to believe the simple facts that healthy living leads to better health.

SECTION III

SCHOOL HEALTH SERVICE

SCHOOL HEALTH SERVICE

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER

1967

To the Chairman and Members of the Special Services Sub-Committee

Mr Chairman, Ladies and Gentlemen,

Once again the health of the school children is very satisfactory, and the progress achieved over the years has been well maintained. This is due in large measure to the preventive approach to medical care which can be applied so successfully in the captive environment of school life and which unfortunately can never be so effectively applied again, although screening techniques for the early diagnosis of disease are becoming more acceptable to the adult population. The School Health Service, which predated the National Health Service by nearly forty years, has been largely responsible for the high standard of health of our school children today. It is to be hoped that, in the course of time, the National Health Service will be equally successful with the adult population. This is a point worth pondering when one hears the suggestion that the School Health Service has outlived its usefulness.

As in recent years emphasis continues to be directed both in diagnosis and treatment to the handicapped child and the child with a specific defect for which remedial measures are available. Much more time is now directed to the mentally backward child, to the child with speech defect, the deaf, the maladjusted, the physically handicapped, and other defects requiring long term observation and assessment. Another category now emerging and requiring special care is the child in the problem family. These children unfortunately do not respond to the specific remedies appropriate for special defects. They are a social problem often worse for the teacher than the doctor but usually both education and health suffer. The ultimate, because it is often the only effective remedy, is the removal of the child to a special boarding school, away from the adverse influence of the family environment.

Another aspect of school health to which we are devoting more attention is health education, a difficult enough task with the adult, but more so with the schoolchild who, as far as health is concerned, is perfectly happy to live in the present, and is not prepared to be scared about the future. This is a very understandable and healthy outlook, but a constant reminder of healthy habits is necessary, and more especially the avoidance of unhealthy habits, if the benefits achieved at school are to be carried into adult life. Health education is often the least rewarding aspect of our work because one sees no immediate return, but it is encouraging to note the increasing co-operation and appreciation from the teaching staff who increasingly ask for talks on health matters in their schools.

The daily routine work continues, and is not replaced by these more special activities, but the general emphasis of the school health service is changing, to produce a more selective, a more effective, and at the same time a more economic service in terms of the results achieved for work done. These changes are necessary to keep abreast with current advances and modern thought and are carried out with the encouragement of the Special Services Committee and I am grateful to the Chairman and every member for their support, and for the help of a loyal and co-operative staff. I must

also record my appreciation once again for the very helpful and friendly liaison I enjoy with the family doctors and hospital staff who make my job so much easier.

T. O. P. D. LAWSON,
School Medical Officer.

School Medical Inspections

The routine medical inspections of school children have continued during 1967 and 3,543 children were examined throughout the year.

Children are examined :

- (a) on entry for the first time to a maintained school ;
- (b) during the year in which they are 8 years old and
- (c) in the last year of their attendance at a secondary school.

Older pupils are examined before they leave school at the higher age groups in Pate's Grammar School for Girls, the Boys' Grammar School and the Technical High School.

As a result of these inspections, 370 pupils were found to have defective vision (excluding squint) and where necessary were referred to the Eye Specialist. A further 445 children were found to be suffering from other defects or diseases requiring treatment, and the necessary action was taken in all cases. The number of defects requiring to be kept under observation but not requiring treatment was 1,074 and the children concerned were kept under special observation during the year. This latter group, of course, includes very many minor defects which may be remedied spontaneously and never require treatment. They are kept under observation merely as a precautionary measure. This is, of course, the main purpose of the routine medical inspections, to prevent the minor defect becoming a major one.

The school population at the end of 1967 was 12,428 and every child has an up-to-date school medical record.

Special School Medical Inspection

These inspections cover children examined other than at a routine medical inspection for some special reason. During 1967, 20 children were examined at these inspections, and the appropriate action taken.

Re-Inspections

Re-inspections have been held each term in all schools in the Borough when children who had previously been noted at routine or special medical inspections to be in need of further observation and advice, were seen by the School Medical Officers.

During 1967, 774 children were examined at these inspections.

PART I

MEDICAL INSPECTION OF PUPILS ATTENDING

MAINTAINED PRIMARY AND SECONDARY SCHOOLS

(Including Special Schools)

Age Group inspected (By year of Birth)	No. of Pupils who have received a full medical examination	PHYSICAL CONDITION OF PUPILS INSPECTED		No. of Pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infes- tation with vermin)		
		Satisfactory	Unsatisfactory		For defective vision (excluding squint)	For any other condition recorded at Part II	Total individual pupils
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1963 and later	15	15	—	—	—	1	1
1962	676	676	—	—	24	90	106
1961	431	431	—	—	13	58	66
1960	67	67	—	—	3	8	10
1959	1031	1031	—	—	105	115	204
1958	65	64	1	—	6	9	15
1957	39	39	—	—	4	3	6
1956	37	37	—	—	5	4	9
1955	149	149	—	—	26	32	53
1954	43	43	—	—	6	6	11
1953	572	571	1	—	59	63	117
1952 and earlier	418	418	—	—	119	56	156
TOTAL	3543	3541	2	—	370	445	754

Col. (3) total as a percentage of Col. (2) total 99.94% } To two places of decimals.

Col. (4) total as a percentage of Col. (2) total .06% }

Table B. Other Inspections

Number of Special Inspections	...	...	...	20
Number of Re-inspections	...	...	...	774
TOTAL				794

Table C. Infestation with Vermin

(a)	Total number of individual examinations of pupils in schools by school nurses or other authorised persons	...	...	22,647
(b)	Total number of individual pupils found to be infested	...	...	179
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)	...	...	160
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3) Education Act, 1944)	...	...	—

PART II

**Defects found by Periodic and Special Medical Inspections
during the Year**

Defect Code No.	Defect or Disease		Periodic Inspections				Special Inspections
			Entrants	Leavers	Others	Total	
4	Skin	T	15	32	15	62	—
		O	31	9	20	60	—
5	Eyes—(a) Vision	T	41	180	149	370	—
		O	25	18	34	77	1
	(b) Squint	T	41	9	24	74	—
		O	1	1	2	4	—
	(c) Other	T	2	3	9	14	—
		O	4	1	4	9	—
6	Ears—(a) Hearing	T	3	1	7	11	2
		O	63	19	41	123	4
	(b) Otitis Media	T	3	2	6	11	—
		O	15	10	9	34	—
	(c) Other	T	1	1	2	4	—
		O	2	—	3	5	—
7	Nose and Throat	T	40	6	25	71	—
		O	118	12	30	160	—
8	Speech	T	7	1	6	14	—
		O	31	5	21	57	—
9	Lymphatic Glands	T	—	—	—	—	—
		O	8	—	1	9	—
10	Heart	T	1	—	—	1	—
		O	20	5	13	38	1
11	Lungs	T	7	3	3	13	—
		O	43	15	28	86	1

Defect Code No.	Defect or Disease		Periodic Inspections				Special Inspections
			Entrants	Leavers	Others	Total	
12	Developmental—(a) Hernia...	T	6	—	1	7	—
		O	7	—	3	10	—
	(b) Other ...	T	5	11	16	32	2
		O	21	10	17	48	—
13	Orthopaedic—(a) Posture ...	T	1	4	3	8	—
		O	5	16	15	36	—
	(b) Feet ...	T	16	5	14	35	1
		O	21	7	11	39	—
	(c) Other ...	T	7	12	4	23	1
		O	15	21	15	51	1
14	Nervous System—(a) Epilepsy	T	2	2	5	9	1
		O	1	2	6	9	1
15	(b) Other ...	T	1	2	—	3	—
		O	2	3	6	11	—
	Psychological—(a) Development	T	—	15	44	59	2
		O	15	7	21	43	2
	(b) Stability ...	T	6	3	19	28	—
		O	82	9	39	130	4
16	Abdomen	T	5	—	1	6	—
		O	7	4	10	21	1
17	Other	T	1	—	3	4	—
		O	8	1	5	14	—

(T)—Treatment. (O)—Observation.

PART III

Treatment of Pupils attending maintained Primary and Secondary Schools (Including Special Schools)

Table A. Eye Diseases, Defective Vision and Squint

	<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint	36
Errors of refraction (including squint)	833
Total	869
Number of pupils for whom spectacles were prescribed	498

Table B. Diseases and Defects of Ear, Nose and Throat

	<i>Number of cases known to have been dealt with</i>
Received operative treatment :—	
(a) for diseases of the ear	21
(b) for adenoids and chronic tonsilitis ...	865
(c) for other nose and throat conditions ...	15
Received other forms of treatment	14
Total	<hr/> 915 <hr/>

Total number of pupils still on the register of schools
at 31st December, 1967, known to have been
provided with hearing aids :—

(a) during the calendar year 1967	5
(b) in previous years	15

Table C. Orthopaedic and Postural Defects

	<i>Number known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments	223
(b) Pupils treated at school for postural defects	—
Total	<hr/> 223 <hr/>

**Table D. Diseases of the Skin (excluding uncleanliness, for
which see Table C of Part I)**

	<i>Number of pupils known to have been treated</i>
Ringworm (a) Scalp	—
(b) Body	4
Scabies	—
Impetigo	15
Other skin diseases	16
Total	<hr/> 35 <hr/>

Table E. Child Guidance Treatment

	<i>Number known to have been treated</i>
Pupils treated at Child Guidance clinics	212

Table F. Speech Therapy

	<i>Number known to have been treated</i>
Pupils treated by speech therapists	172

Table G. Other Treatment Given

						<i>Number known to have been treated</i>
(a)	Pupils with minor ailments	...	...			835
(b)	Pupils who received convalescent treatment under School Health Service arrange- ments	...	...	...	...	2
(c)	Pupils who received B.C.G. vaccination	...				746
(d)	Other than (a), (b) and (c) above.					
	Ultra Violet Light Treatment	...				14
	Chest	...	...	...	...	6
Total (a) - (d)						1603

The foregoing tables show no diminution in the number of children examined and requiring treatment. There is in fact an overall increase consistent with an increase in the school population. The incidence of defects is not high, nor should it be, if the service functions efficiently year by year.

Minor Ailments Clinics

These clinics have been reduced from three to two per week in order to allow for some of the more specialized work already referred to. This has caused no hardship as the need for these clinics has been diminishing over the years.

Audiometry

The routine testing of school children for hearing defect has continued in the schools during the year with the co-operation of head teachers, and has proved one of the most effective preventive measures of the School Health Service. The County Education Authority provides the services of a skilled examiner and the six-year old group is selected for examination, although the examiner will test any special case referred by the head teacher. This is proving a very useful means of discovering early cases of hearing defect and where necessary, treatment can be started at an early age before the disability can affect the child's education. Details of 1,069 audiometric examinations carried out in Cheltenham schools during the year, are shown in the following tables :

Routine Tests

<i>Number Tested</i> 1069	<i>Numbered Failed</i> 68	<i>Referred Hospital</i> 8
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Special Cases and Re-tests

<i>Number Tested</i> 276	<i>Number Failed</i> 69	<i>Referred Hospital</i> 12
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I am greatly indebted to Mr G. N. Barker, M.B., B.S., F.R.C.S. (Ed.), D.L.O., Ear, Nose and Throat Surgeon, Cheltenham General Hospital, for his co-operation in the examination and treatment of cases referred to him by our School Medical Officers.

PART IV

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

Staff

The staffing position did not improve during the year. Although we were glad to welcome Mr J. B. Clarke, L.D.S., who took up his post in March, the improvement did not last long as Mr A. W. McCarthy retired in July after 14 years' service. We also had the services of a hygienist, Miss W. Lacey, for a few months until she left the area on getting married.

Due to the difficulty experienced in keeping a hygienist fully occupied during the school holidays it was decided not to re-advertise this post and to replace it with that of a dental auxiliary. This category of worker can not only do the Dental Health Education which is such an important part of the Local Authority Dental Service but also can do a much wider variety of clinical work when the schools are closed. Unfortunately such a post cannot be filled until we move to the new clinics in St. George's Road so that for a while the Dental Health Education Programme will be dormant.

Premises

We hope that this will be the last year we shall spend in our present accommodation. We have in front of us the prospect of working at last in purpose-built surgeries with really modern equipment. However, we should not forget that the status of a service and the climate of opinion existing between it and the public depends on the friendliness, co-operation and standard of the staff as much as on the excellence of the premises. However, it is to be hoped that these new clinics will prove an inducement to new staff as well as symbolising the new ideas and modern approach to children's dentistry which it is our aim to offer to the parents and the children of Cheltenham.

Inspections and Treatment

The number of children inspected during 1967 fell slightly from the 1966 figure as did the total number of sessions worked. However, the proportion of those who were found to be dentally fit rose from 24.7% to 30.2%. This may be accounted for by the fact that a larger proportion of younger children were seen during 1967 than 1966.

Ideally, of course, we should inspect every school once a year. From a statistical point of view it is important that like be compared with like, and the greater number of children seen would, in itself, mean that the results of the surveys which we do on 5, 8 and 14 year olds would have a higher validity. However, this would mean that we should have to inspect about one school every week during term time which would place an immense if not intolerable burden upon our clerical facilities. Not only that but it would

mean that with our present ratio of 1 dental officer to 6,000 children instead of the recommended 1 : 3,000, either the amount or the standard of treatment given to each child would have to be reduced. Rather than do this I feel that we should concentrate on a high standard of work, encourage those who attend to return for regular check-ups on their own initiative and at school inspections encourage those who are not having regular treatment from either the schools service or the general dental service to mend their ways.

Surely it is better to cope efficiently with part of the problem than to fail to cope with the whole problem.

With regard to the amount of work done during the year it will be seen that in nearly all cases the amount of work done has increased although the number of sessions decreased.

I would like to take this opportunity to thank all members of the staff who have worked so hard during the year under very difficult circumstances.

Full details of inspections and treatment in 1967 are given below.

1. Attendances and Treatment

First Visit	2,234
Subsequent Visits	3,379
Total Visits	5,613
Additional Courses of Treatment commenced	202
Fillings in permanent teeth	4,142
Fillings in deciduous teeth	1,435
Permanent teeth filled	3,258
Deciduous teeth filled	1,242
Permanent teeth extracted (Caries/ortho)	407/208
Deciduous teeth extracted	1,869
General anaesthetics	894
Emergencies	357
Number of Pupils X-rayed	288
Prophylaxis	246
Teeth otherwise conserved	180
Number of teeth root filled	7
Inlays	2
Crowns	7
Courses of treatment completed	2,171

2. Orthodontics

Cases remaining from previous year	9
New cases commenced during year	31
Cases completed during year	17
Cases discontinued during year	3
Number of removable appliances fitted... ..	33

3. Anaesthetics

General anaesthetics administered by Dental Officers... ..	209
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4. Inspections and Sessions

First inspection of year at school	5,586
First inspection of year at clinic	821

Total 6,407

Number found to require treatment	...	...	...	...	4,472
Number offered treatment	...	...	...	...	3,599
Pupils re-inspected during year at clinic	...	...	...	...	278
Number found to require treatment	...	...	...	...	225
Sessions devoted to treatment	...	...	...	...	1,027
Sessions devoted to inspections	...	...	...	...	59
Sessions devoted to Dental Health Education	...	...	...	...	26
Failed appointments	...	...	...	...	1,075

INFECTIOUS DISEASES

As already stated, the impact of the common infectious diseases on the health of the school children is almost negligible as the following figures show :—

<i>Measles</i>	<i>Diphtheria</i>	<i>Scarlet Fever</i>	<i>Whooping Cough</i>	<i>Poliomyelitis Paralytic</i>	<i>Non-Paralytic</i>	<i>Dysentery</i>
106	Nil	4	2	Nil	Nil	Nil

The incidence of infectious disease is negligible and will be even more so when vaccination against measles is introduced in the near future. The schools nowadays are almost entirely free of serious infectious disease and will remain so as long as our vaccination and immunisation programmes are regularly pursued.

Tuberculosis

There were no notifications of tuberculosis among school children during the year.

B.C.G. Vaccination

Vaccination against tuberculosis is now accepted almost universally by parents in Cheltenham. The figures given below show an acceptance rate of 96%, the highest yet achieved.

The Medical Research Council follow-up of all children who have received B.C.G. Vaccination under the Local Education Authority scheme, continues. The first children to receive protection against tuberculosis by this means are now 27 years old, and in these young adults all over the country, there is a very substantial reduction in the incidence of tuberculosis.

<i>No. of Schools</i>	<i>Invited</i>	<i>Accepted</i>	<i>Tuber- culin Tested</i>	<i>No. Positive</i>	<i>No. Negative</i>	<i>Positive</i>	<i>NOT Vaccin- ated</i>	<i>Vaccin- ated</i>
12	995	960	885	104	746	14%	35	746

SPEECH THERAPY

The Speech Therapy staff was increased by the appointment of Mrs P. Grieve for two sessions weekly at Eildon Junior Training Centre. She worked there during the year until her resignation in December. Latterly, Miss C. Newlove was appointed for two sessions weekly for the School Health Service starting on 7th November and she will also take over the Eildon sessions from January, 1968.

These appointments have made possible an even more comprehensive service though, as the number of children referred for treatment is increasing, it is still difficult to provide adequate treatment for them all. This increase in numbers appears to be due to

- (a) the increase in child population.
- (b) increased awareness of doctors, health visitors and teachers of the possibilities of the service.
- (c) increased knowledge in this sphere which makes possible the assessment and treatment of more disorders and from an earlier age.

Many cases, particularly those suffering from cerebral palsy or from mental handicap require help over a prolonged period.

Physiotherapy

A physiotherapy clinic is held on three days per week. Children are referred by the School Medical Officer from the routine school medical inspections or from minor ailments clinics. Treatment consists of graduated exercises and ultra violet light. Progress is watched and the children are re-inspected at school.

Recuperative Holidays

We are indebted to the Cheltenham Rotary Club for generously providing a free fortnight's holiday for Cheltenham schoolboys at Weston-super-Mare.

The boys selected by the school medical officers, are convalescent or debilitated children, whose parents would not be able otherwise to provide them with a recuperative holiday by the sea. The boys stay at the Rotary Boys' House where a healthy and happy holiday, with good food and regular hours, does much to restore them to their normal vigour. Travelling expenses are also provided by the Rotary Club.

The Cheltenham Rotary Club has been providing these holidays for schoolboys in the town since 1928, and up to four boys per month can be sent to Weston. On behalf of the School Medical Committee, I would like to express our sincere thanks for this very fine example of "Service Before Self" and couple with it the gratitude of many parents in the town.

Child Guidance Clinic

The Child Guidance Clinic continues to provide a service for which there is no lessening of demand. The number of children for whom treatment is requested by parents, doctors and teachers, increases every year. Dr P. R. Doherty with his staff of psychologists and psychiatric social workers are always working at capacity both at the clinic and in the schools, to cope with the waiting list. I am very grateful to him for his co-operation and the effort he makes to see children as soon as possible.

Enuresis Clinic

The Enuresis Clinic continues to provide a most useful and much appreciated service for children subject to this distressing complaint. Many requests for the treatment of children are received from family doctors. Considerable success has been achieved and any children requiring further investigation are referred to Mr P. Borcham, F.R.C.S., at the General Hospital with the approval of the family doctor.

A summary of the work carried out during the year is as follows :—

Clinics held	...	...	...	...	...	39
New cases seen	...	...	...	...	...	65
Consultations	...	...	...	...	...	228
Cases closed	...	...	...	...	...	55
Cases still under treatment	...	...	...	...	...	20

The following table shows a breakdown of the “cases closed”.

Cured	Improved	No Improvement	Total
45	6	4	55

Employment of Children and Young Persons

During the year 112 examinations were carried out as to fitness for school children to be employed before or after school hours and the necessary certificate was granted in all such cases. The standard of fitness among Cheltenham school children is such that the refusal to issue a certificate of fitness is exceptional.

These children are kept under medical observation and there has never been any evidence that the part-time employment has been in any way detrimental to their physical or mental welfare.

All children leaving school are examined and advised in the light of their known medical histories as to any type of work for which they may have been found to be physically unsuitable and good liaison has been maintained with the Youth Employment Officer in this respect.

Handicapped Children

In accordance with the requirements of the Handicapped Pupils and Special Schools Regulations, 1959, 54 pupils have been examined or re-examined during 1967 for the purpose of ascertaining whether or not they are suffering from a disability of the mind or body, and if the disability is such as to fall within a category requiring special educational treatment as prescribed by the Regulations. Of the pupils examined during 1967 the following recommendations were made :

To attend Day Special School	...	...	...	36
To attend Residential School	...	...	...	7
Unsuitable for education at school	...	...	...	7
Requiring friendly care and guidance	...	...	...	3
Recommended for Home Tuition	...	...	...	1

In addition a further 17 pupils were examined; 14 were found to require special education in an ordinary school and 3 were found to have no disability.

The results of these examinations which were carried out by our medical staff, who are specially qualified for the purpose, are brought before the Special Services Sub-Committee with an appropriate recommendation. They also include the examinations of school children referred to the Child Guidance Clinic with the recommendation of the Medical Director.

SECTION IV

ENVIRONMENTAL HYGIENE

**Report of Chief Public Health Inspector
and Manager of the Public Abattoir**

TO THE WORSHIPFUL THE MAYOR, THE ALDERMEN AND COUNCILLORS OF THE BOROUGH OF CHELTENHAM

Mr Mayor, Ladies and Gentlemen,

In presenting my report on the work carried out in the Department during 1967, I should like to express my thanks to the Chairman and members of the Health and Welfare Committee and other Committees of the Council for their support and encouragement.

The number of animals slaughtered at the Public Abattoir increased to 42,476. The latest figures for the financial year 1966/67 showed that the Abattoir realised a profit of £1,082. Two major items had to be carried out during the year — one was the division of the large covered lair into separate pens and the other was the replacement of the 20-year-old vertical boiler, which had been condemned by the Insurance Company's Inspector, with a new Powermaster boiler. The installation of this £3,000 boiler and the steel partitions in the lair were carried out by our own staff at the Abattoir, which resulted in economy.

The widespread outbreak of foot and mouth disease towards the end of the year had a considerable effect on the work at the Abattoir. The normal flow of livestock was interrupted by cattle trucks being diverted to the Abattoir at all hours by the Police.

It is extremely difficult to account for the very extensive outbreak of foot and mouth disease that spread throughout the country during the winter, but it undoubtedly highlights the unsatisfactory method of the disposal of dead carcasses in this country. It is still possible for the raw meat from the carcasses of animals that have died in a field to be hawked around to various shops and sold as pet food, the only safeguard being a touch of green colour which is of little significance to the average housewife, most of whom are unaware of the very dangerous potentialities of bringing such products into the home. All raw meat and offal from the carcasses of animals that have so died should obviously be subjected to steam sterilisation.

The steady reduction in the incidence of tuberculosis in animals continued. In the case of pigs, lesions were found in 0.6% of the 13,603 examined and in bovines, excluding reactors, the percentage was 0.02%. The number of T.T. reactors increased by 33% over the figure for 1966, whilst the incidence of cysticercus bovis was lower at 0.18% compared with the previous year.

The Franchise Market continues to be very popular — in fact, it is difficult to find accommodation for new stall-holders. It is interesting to note that 7 years ago the annual income from the tolls at this Market was £39, whereas for the financial year 1966/67, the amount received in tolls reached £1,599, which, together with the rents from the various lease-holders, resulted in a profit of £4,154.

1,646 visits were made under the Offices, Shops and Railway Premises Act, entailing the service of some 178 notices. At the end of the year 87% (976) of all the offices and shops registered within the Borough had been inspected.

40 accidents were investigated under the Act, the most serious being that of the male employee whose leg was broken in two places as a result of it becoming trapped in a conveyor belt. Other aspects of the Act to receive attention were the provision of general facilities such as ventilation, lighting and heating and the inspection of machinery.

The number of premises dealt with by means of Closing and Demolition Orders and Certificates of Unfitness under the Housing Acts has, since 1955, reached 800, well ahead of the three five-year programmes submitted to the Ministry. 4,762 visits were carried out in connection with housing during the year.

A special project was undertaken in order to obtain accurate facts relating to the use of large Regency houses under modern conditions. A 5-storey Crescent of houses, some 140 years old, originally intended for occupation as single units, was chosen and some very interesting facts emerged. The number of flats in the Crescent is 200, occupied by 347 people. Many of the basements are extensively damp, 25 of which, together with one or two of the worst flats, have been made the subject of Closing Orders. The provision of fundamental facilities in these flats and bed-sitting rooms is quite good, but the problem presented by the Crescent as a whole, with its lack of fire proofing, general decay and height of 60 ft., is truly a formidable one. There is little doubt that it ought to be dealt with as one entity, including the general environmental amenities in the vicinity. The new White Paper "Old Houses into New Homes" may make some contribution to problems of this type.

Another trend is the continual increase in the ratio of owner/occupiers. In a survey a few years ago in one area this was 61%. During the year, in a similar area, the ratio was found to be 75% with a corresponding improvement in the houses.

The increase in the number of derelict areas that are manifesting themselves gives rise to much concern. In many cases houses have been demolished, but no redevelopment has taken place, with the result that the sites become rubbish dumps and bricked-up condemned houses are an unsavoury menace to the neighbourhood. A flexible plan is required to redevelop these areas, utilising the land within a reasonable period of time in order to prevent further deterioration in existing sound houses.

Many complaints relating to excessive noise continue to be received, arising mainly from the establishment of new factories or the enlargement of small businesses in close proximity to houses. On some occasions the change-over to night shifts, a matter not within the control of this Department, has been the cause of the complaints. Considerable reduction in noise emission has been achieved by improved insulation, the removal of noisy plant, such as compressors, to a greater distance from the houses, and the erection of baffles in the case of excessively noisy fans. In general, firms have been most co-operative in the reduction of unnecessary noise to an acceptable level.

The Council has continued with the policy of making small Smoke Control Orders where these are indicated by development or redevelopment of areas. Two such Orders have been confirmed during the year with a third off Swindon Road, covering some 80 acres, having been agreed to in principle.

Considerable difficulty has been caused by the widespread practice of demolition contractors burning combustible material on demolition sites in built-up areas. Legal proceedings were instituted against a firm of scrap metal dealers for burning refuse within 60 yards of houses, creating a nuisance by smoke and ash. Since this time there have been no fires and all waste materials have been disposed of at the Corporation Tip. The deposit gauge average was higher than in 1966, reaching 12.4 tons per sq. mile per month, as against 10.13 tons. The averages recorded by the three gauges

were 8.7 tons at Hesters Way, 17.7 tons at the Municipal Offices and 10.7 at the Vauxhall Inn, Tewkesbury Road, which was set up at the beginning of the year to keep observations on the new Coal Concentration Depot serving North Gloucestershire.

In the sphere of food hygiene the Public Health Inspectors made 3,541 visits, dealing with food and food premises, including unsound food investigations. 224 formal and informal samples of food and drugs were taken of which only 2 were adversely reported upon by the Analyst and some 58 complaints were received from members of the public in respect of food and foreign bodies in food. Proceedings were instituted in three cases — in one a carton of frozen lemon crush was heavily infected with mould and was reported on by the Analyst to be adulterated. It was at least 5 months' old and the vender was fined £25 with £5 5s. costs. The second case involved an apple fruit pie which was extensively mouldy and 13 days' old when sold, resulting in the vendors being fined £25 with £5 5s. costs. In the third case a portion of a meat pastie had the cork tip of a cigarette embedded in it. The Public Analyst stated that this had been baked in the pie and the firm were fined £25 plus £10 10s. costs.

Talks on the work of the Department, usually illustrated by films, were given to a variety of organisations, including the Ladies' College Citizenship Class, Student Nurses at the General Hospital, Trainee Health Visitors and various social groups.

Mr R. J. Wintle, a District Public Health Inspector with this Authority for 12 years, resigned to take up a position in industry and the vacancy was filled by the appointment of Mr A. Taylor from Stoke-on-Trent. Mr R. S. C. Walker obtained his Public Health Inspector's Diploma in June after 4 years' training at Bristol, filling the post of Additional Public Health Inspector.

In conclusion, I should like to express my sincere appreciation to my Deputy, Mr A. L. Jones, and the Inspectors and staff for the work they have undertaken during the year, a summary of which is given in the following pages.

J. F. URSELL,
Chief Public Health Inspector.

CHIEF PUBLIC HEALTH INSPECTOR'S STAFF

1967

TECHNICAL

Deputy Chief Public Health Inspector	<i>A. L. Jones, M.A.P.H.I., San. Science R.S.H.*†</i>
District Inspectors	<i>H. Stone, M.A.P.H.I.*†</i> <i>G. J. C. Buck, M.A.P.H.I., M.R.S.H.*†</i> <i>A. H. Carling, M.A.P.H.I.*†</i> <i>R. J. Wintle, M.A.P.H.I.*†</i> <i>(Resigned April)</i> <i>R. G. Webb, M.A.P.H.I., San. Science R.S.H.*†‡</i> <i>A. Taylor*† (Appointed June)</i>
Additional Inspector	<i>R. S. C. Walker, M.A.P.H.I.*†</i>
Pupil	<i>A. Hargreaves</i>

ABATTOIR

Meat Inspector/Superintendent	<i>R. Hullah, M.Inst.M., M.A.P.H.I.*†</i>
Deputy Superintendent	<i>B. R. Fisher</i>
Assistant Superintendent	<i>A. H. J. Lewis</i>
Handymen	<i>A. Edwards</i> <i>S. C. Wearing</i>
Clerk	<i>Vacant</i>

*Certified Meat and Food Inspector, R.S.H.

†Public Health Inspector's Education Board Certificate.

‡Smoke Inspector's Certificate.

DISINFECTION AND DISINFESTATION

Assistant Disinfection Officer	<i>J. W. Quarterman</i>
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RODENT CONTROL

Pests Officer	<i>B. G. Davies</i>
Rodent Operator	<i>R. T. Harvey</i>
Rodent Operator	<i>Vacant</i>

CLERICAL

Senior Clerk	<i>D. Y. Harrison</i>
Secretary	<i>Miss M. E. J. Edden</i>
Clerical Assistant	<i>Miss E. M. Oliver</i>
Shorthand Typist	<i>Mrs J. Dimond</i>
Junior Clerk	<i>Miss A. A. Griffiths</i>

SUMMARY OF VISITS, 1967

TABLE I

1. Public Health

Water Supply	68
Drainage	2,722
Stables and Piggeries	15
Waste Food Boiling Plants	17
Common Lodging House	15
Houses Let in Lodgings	9
Caravan Sites	56
Public Conveniences	51
Theatres and Places of Entertainment	12
Refuse Collection	202
Smoke Observations	13
Clean Air Act	350
Marine Store Dealers	10
Rodent and Pest Control	124
Houses inspected under Public Health Act	863
Re-visits	705
Rag Flock Premises	19
Hairdressers' Shops	261
Enquiries following Infectious Disease	12
Miscellaneous Infectious Disease Visits	3
Interviews	711
Noise Nuisance	333
Miscellaneous Sanitary Visits	639
	<hr/>
	7,210

TABLE II

2. Housing

Number of houses inspected under Housing Act	1,570
Re-visits	2,164
Overcrowding—Number of houses inspected	46
Re-visits	5
Verminous Dwellings inspected	5
Rent Act	2
Miscellaneous Housing Visits	970
	<hr/>
	4,762
	<hr/>

TABLE III

3. Food Hygiene

Abattoir (Additional visits by District Inspectors) ...	...	145
Other premises—meat inspection ...	...	54
Butchers' Shops ...	...	233
Fishmongers and Poulterers ...	...	28
Grocers' Shops ...	...	270
Greengrocers and Fruiterers ...	...	77
Licensed Premises ...	...	151
Dairies and Milk Shops ...	...	92
Ice Cream Premises ...	...	57
Confectioners ...	...	63
School Canteens ...	...	91
Food Preparing Premises ...	...	352
Restaurant and Hotel Kitchens ...	...	381
Market Stalls ...	...	143
Street Vendors and Food Delivery Vehicles...	...	110
Food Inspection and Condemnation ...	...	299
Milk, Bacteriological Samples...	...	49
Food and Drugs Samples ...	...	250
Offensive Trades ...	...	55
Fried Fish Shops ...	...	46
Bakehouses ...	...	67
Miscellaneous Visits in connection with food ...	...	285
Removal of Unsound Food ...	...	243
		<hr/>
		3,541
		<hr/>

TABLE IV

4. Offices, Shops and Factories

Factories ...	...	84
Outworkers ...	...	25
Offices and Shops ...	...	1,646
		<hr/>
		1,755
		<hr/>

TABLE V

5. Disinfection and Disinfestation*Disinfection :*

Premises fumigated ...	...	4
Infectious articles disinfected ...	...	26
Other articles disinfected ...	...	165

Disinfestation :

Premises treated ...	...	15
Articles treated ...	...	85

Destruction of Mattresses, etc. :

Articles destroyed ...	...	14
Other visits ...	...	768

1,077

TABLE VI

6. Rodent Control

Rats and Mice :

Number of visits for Inspection	...	...	...	...	1,469
Number of visits for Treatment	...	...	...	...	2,182

Other Pests :

Number of visits for Inspection	...	...	...	...	269
Number of visits for Treatment	...	...	...	...	542

4,462

TABLE VII

7. Other Visits

Shops Act—Hours of Trading	...	...	...	...	21
Shops Act—Employment of Young Persons	...	...	...	...	1
Fabrics—Misdescription Regulations...	...	...	...	...	16
Merchandise Marks Act	...	...	...	...	113
Pet Animal Shops	...	...	...	...	10
Animal Food Shops	...	...	...	...	5
Animal Boarding Establishments	...	...	...	...	2
Carry Cots (Safety) Regulations	34

202

Total of Tables I, II, III, IV, V, VI and VII	23,009
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NOTICES SERVED

	<i>Informal Notices</i>		<i>Formal Notices</i>	
	<i>Served</i>	<i>Complied</i>	<i>Served</i>	<i>Complied</i>
Public Health Act, 1936	162	133	9	14
Pests Act, 1949 ...	1	—	—	—
Gloucestershire County Council				
Act, 1956 ...	3	2	—	—
Housing Act, 1961 ...	3	—	—	—
Factories Act, 1961 ...	2	2	—	—
	<hr/> 171	<hr/> 137	<hr/> 9	<hr/> 14

In addition, letters concerning offences and contraventions noted during inspections carried out under the following Acts and Regulations were sent :

Milk and Dairies Regulations, 1959	...	...	...	...	2
Food Hygiene (General) Regulations, 1960	...	...	...	...	52
Offices, Shops and Railway Premises Act, 1963	...	...	...	...	178
Noise Abatement Act, 1960	...	...	...	...	4

INFORMATION IN REGARD TO LAND CHARGES

Requests for information under the Land Charges Act were received and dealt with during the year in respect of 2,237 official searches.

**PRESCRIBED PARTICULARS ON THE ADMINISTRATION OF
THE FACTORIES ACT, 1961**

PART 1 OF THE ACT

1. INSPECTIONS for purposes of provisions as to health (including inspections made by the Public Health Inspectors).

Premises (1)	Number on Register (2)	Numbers of		
		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	31	4	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ...	367	66	1	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' Premises)	18	14	1	—
TOTAL ...	416	84	2	—

2. Cases in which DEFECTS were found

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	1	1	—	—	—
(b) Unsuitable or defective	1	1	—	1	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
TOTAL	2	2	—	1	—

PART VIII OF THE ACT OUTWORK (Sections 133 and 134)

Nature of Work (1)	Section 133			Section 134		
	No. of out-workers in August list required by Section 133 (1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in unwholesome premises (5)	Notices served (6)	Prosecutions (7)
Wearing apparel (Making etc.)	11	—	—	—	—	—

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Report for 1967 as submitted to H.M. Inspector of Factories,
Ministry of Labour.

Good progress was maintained during 1967 in implementing the provisions of this Act. At the end of the year 87% of all offices and shops registered within the Borough had been given a general inspection. The deficiencies recorded were brought to the attention of the owners and occupiers concerned and 178 Notices were issued for this purpose. Only a minority failed to comply with the requirements of the Act within a reasonable period and in 9 instances the facts were reported to the Health Committee who authorised proceedings. In no case was legal action actually necessary however, a final warning proving sufficient to secure compliance.

A total of 1,646 visits were made under this Act during the year.

In the summer complaints were received of excessive heat in two shops and these were entirely due to inadequate ventilation. In the first instance reports were received of unsatisfactory working conditions in the perfumery department of a large departmental store, the temperature being between 82° and 84°F. at a time when the external temperature was 75°F. Conditions were improved by reducing the number of lights and providing better ventilation. The second case involved a Jeweller's shop where the temperature at counter level was 83°F. and in the passages giving access to the windows 92°F. and 95°F. In the window itself the temperature was 120°F. and a number of thermometers had broken due to the excessive heat. The situation was improved by reducing the number of lights in the shop and recommendations were made with a view to the provision of suitable ventilation.

Experience has shown, in the enforcement of this Act, that, whilst great care is taken in the design of the shop fronts and show cases, the attention given to ventilation is often inadequate.

Accidents

40 accidents were notified and investigated during 1967, almost 50% resulting from persons slipping or falling. 33 of these were accidents in the true sense of the word and due to an unusual combination of circumstances. In 10 instances recommendations were made with a view to preventing a recurrence, i.e. by repairing or improving the surface of floors and staircases, by providing additional working space, repairing ladders or providing adequate steps and fitting the appropriate guards to machinery.

The most surprising "accident" concerned a youth who was absent for some days having damaged his hand trying a "Karate" chop on a 2in. board. The board remained intact, but the hand was extensively damaged!

It is interesting to note that, in 6 cases, employees admitted that they did not comply with the instructions laid down by employers for their safety. There were 2 cases involving powered conveyors, in one of which the leg of a male employee was trapped and broken in two places as a result of standing on a moving conveyor.

During the past few years there have been many serious accidents involving conveyors and regular inspections are made to see that adequate control points are installed and that all the driving machinery is suitably guarded; also, that notices are fixed in conspicuous positions at each end of the conveyor belts stating that no person must walk on them or use them as a means of transport under any circumstances.

Registration and General Inspections

Class of Premises	No. of Premises Registered during the year	No. of Registered Premises at end of year	No. of Registered Premises receiving general inspection during the year
Offices	66	425	127
Retail Shops	41	575	134
Wholesale Shops, Warehouses ...	6	44	7
Catering establishments open to the public, canteens ...	4	80	20
Fuel storage depots ...	—	1	—
TOTALS ...	117	1,125	288

ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

<i>Class of Workplace</i>	<i>Number of Persons Employed</i>
Offices	4,304
Retail Shops	4,454
Wholesale Departments, Warehouses ...	586
Catering Establishments open to the public	880
Canteens	63
Fuel Storage Depots	12
Total	10,299
Total Males	4,155
Total Females	6,144

Reported Accidents

Workplace	Number Reported		Total Number Investi- gated	Action Recommended			
	Fatal	Non-Fatal		Prosecu- tion	Formal Warning	Informal Advice	No Action
Offices	—	2	2	—	—	1	1
Retail Shops	—	30	29	—	2	5	22
Wholesale Shops, Warehouses	—	1	1	—	—	—	1
Catering establishments open to public, canteens	—	7	7	—	—	2	5
Fuel Storage Depots	—	—	—	—	—	—	—
TOTALS	—	40	39	—	2	8	29

ATMOSPHERIC POLLUTION CLEAN AIR ACT, 1956

Smoke Control Areas

Orders in respect of Smoke Control Areas Nos. 2 and 3 were confirmed during 1967 and will come into operation on 1st October, 1968.

In view of proposals to develop land off Swindon Road for housing purposes, the Health and Welfare Committee agreed in principle to the establishment of a further Smoke Control Area (No. 4). A survey is being undertaken and it should be possible to include in the area some 80 acres which will eventually be built on. At present there are only 14 existing houses on this land, but ultimately the total will exceed 400 if these development schemes are approved. 11 existing factories and warehouses are heated by smokeless fuels.

Mention was made in my last Report of the anomalous situation in which fuel merchants can supply coal to householders in a Smoke Control Area without committing an offence. The problem has not been improved with the increased popularity of pre-packed fuels sold from retail shops. A wide variety of solid fuels, both smokeless and bituminous, are now sold in these convenient packs and I am sure that where these are supplied from shops situated in Smoke Control Areas, the purchasers are not always aware that they may be buying an unauthorised fuel.

Bonfires

The ubiquitous bonfire is a constant source of annoyance and complaint during the spring and summer months. It is a matter of regret that amateur gardeners mar their magnificent displays of flowers and produce with even more magnificent plumes of smoke! There may be a case for burning hedge trimmings and rose and tree prunings, but normally, if bonfires are kept small and the material to be burnt is dry, relatively little smoke will be produced. The practice of burning paper and household rubbish is unnecessary, as the refuse collectors will collect it along with the domestic refuse.

Difficulty also arises from the widespread practice of Demolition Contractors burning timber and other materials in built-up areas.

A considerable number of complaints relating to diesel fumes from heavy machinery and smoke from bonfires emanating from a large scrap metal yard established in an industrial area adjoining a residential area, have been received over a long period. Regular and frequent observations and visits were made to the premises and the nuisance from diesel fumes was to some extent alleviated by equipping the mobile mechanical cranes with new exhaust system feeds with vertical outlets.

Despite several verbal and written warnings, the Company continued to re-claim wire from rubber-covered cable by means of burning, but it was not possible to obtain sufficient positive evidence that nuisances were being caused, as the fires were some distance from nearby houses and the prevailing south-westerly winds carried smoke over uninhabited land.

However, in December of last year, two large bonfires were burning within 60 yards of houses and a slight westerly wind caused large volumes of smoke to envelop the houses. Particles of paper and cardboard ash floated in the atmosphere over a wide area and there was a smell of burning rags. Three housewives resident nearby confirmed the nuisance and were incensed that ash was being deposited on lines of washing hanging in their gardens. They were all prepared to give evidence in the event of legal proceedings being taken.

Legal proceedings were instituted under the provisions of the Clean Air Act 1956, Section 16(2), but prior to the Court Hearing, the complaint was withdrawn subject to the following terms endorsed by the Defending Counsel's Brief —

- “1. That the Respondents will, within four months, install and use an incinerator to the satisfaction of the Local Authority, for the disposal of site refuse.
2. That the Respondents will not engage in the cutting up of scrap motor vehicles; if at any time such vehicles are dumped on the Respondents' premises, the Local Authority will arrange for the disposal of same.
3. That until the incinerator is put into operation, all rubbish shall be disposed of at the Corporation Tip.”

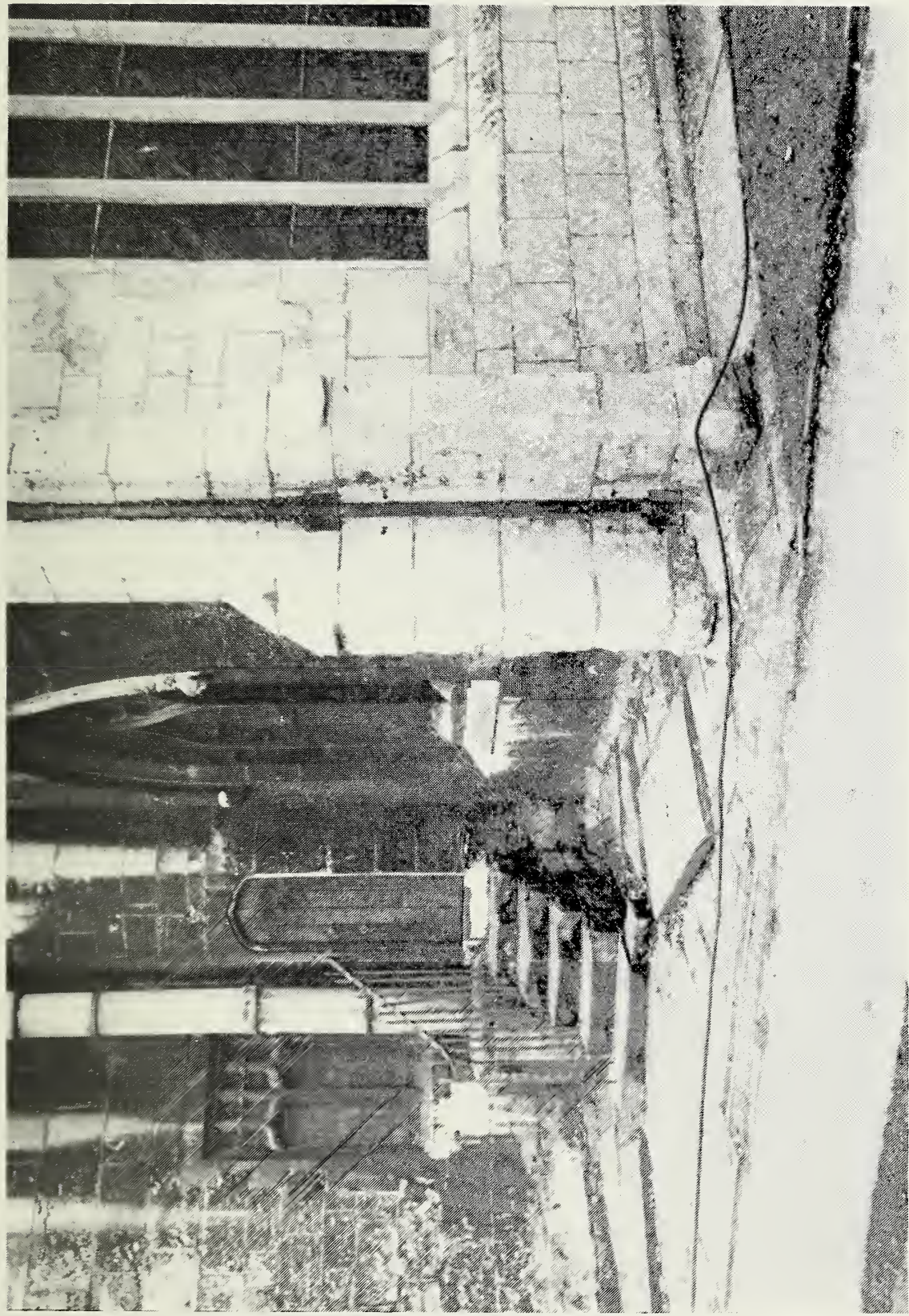
To date, the incinerator has not been provided on the grounds of expense but, since the Court Proceedings, all waste material is being discharged at the Corporation Tip. No derelict vehicles have had to be dealt with during this time and no reports of any bonfires have been received.

NOISE

The year under review produced a sequence of complaints of noise arising from factory installations, temporary engineering works, car washing plants, etc.

The most effective controls which can be imposed have to relate to sound-proofing, positioning of noisy machinery, movement of vehicles and hours of working. Even small sounds can irritate at night and continuous noises of low pitch as from fans or compressors, appear to upset the public more than the noise from intermittent road traffic at all hours, which may, in fact, be louder in volume.

Complaints were received from a number of residents living in close proximity to a large engineering factory that began night shifts. It was felt



Face-lift for Cheltenham Parish Church, showing the effects on the stonework of many years air pollution

that the Council were not in a position to take legal action in this case, as the firm was quite entitled to operate this shift. Informal discussions took place with the Works Engineer and certain recommendations were made including lining the wall of the boilerhouse with acoustic material, construction of an acoustic barrier in front of a large cooling fan and the alteration of ventilation openings in a compressor house. The firm were most co-operative and these works are in progress at the present time which should result in a marked reduction in the level of noise emitted.

Noise from the testing of shot guns manufactured in the town was the cause of complaints. The factory was of poor construction offering little or no sound insulation. Discussions with the management regarding the construction of a sound-proofed testing bay were entered into, but the firm closed down and moved out of the district.

Observations and noise level readings were taken at 6.30 in the morning following complaints of noise from a cooling installation. The source of the noise was traced to a fan assembly on the cooling installation and the management and engineers of the firm co-operated in the investigation until eventually the trouble was found to be a damaged blade on one of the fans. This was replaced and the offending noise eliminated.

HOUSING ACT, 1957

The following action under the above Act was taken during the year (figures for 1966 are given for comparative purposes) :

	1966	1967
(a) Closing Orders (Basement Dwellings)	6	3
(b) Closing Orders (Parts of Houses, etc.)	5	2
(c) Closing Orders Determined	17	16
(d) Demolition Orders	—	1
(e) Houses Closed	17	18
(f) Undertakings to render premises fit	1	—
(g) Undertakings cancelled	1	2
(h) Undertakings not to use premises for human habitation	2	2
(i) Houses demolished	13	7
(j) Local Authority owned houses certified unfit ...	6	30

Action taken since the end of the War :

	No. of Houses	No. of persons displaced
(a) Houses closed	255	805
(b) Parts of buildings closed... ..	423	1,079
(c) Houses closed in pursuance of an undertaking by the Owner	64	219
(d) Houses demolished	445	1,059
(e) Houses made fit as a result of formal notices	325	—

NEW HOUSES

New houses completed in the Borough since June, 1945 :

				By the Council	By Private Enterprise
Up to 31st December, 1962	...	...		4,952	3,145
During 1963	...	...		31	313
„ 1964	...	...		103	360
„ 1965	...	...		157	356
„ 1966	...	...		24	487
„ 1967	...	...		163	338
				<hr/> 5,430 <hr/>	<hr/> 4,999 <hr/>

HOUSING

23 Closing Orders were made on houses and parts of houses, including 3 basements, and 30 Certificates of Unfitness were issued in respect of Corporation owned houses. 1 Demolition Order was made and 7 houses were demolished. 16 Closing Orders were determined, satisfactory works to render the premises fit for human habitation having been carried out.

The reconditioning of three houses was completed for the Housing Committee. Since the scheme commenced in 1958 £45,515, after allowing for the Improvement Grants received from the Ministry, has been spent on the purchase and reconditioning of 43 houses.

Unfit Houses

A survey of unfit housing in Cheltenham was carried out during the year. In the older areas of the town there has been a great increase in the number of owner/occupiers and this was in excess of 60% in the Fairview area. When owner/occupied these houses no longer degenerate but, with the aid of improvement grants, are brought up to a much higher standard and action by the Local Authority is unnecessary.

I do not think that the basic needs of human beings and family life are met by present-day housing standards. The legal standard of unfitness by which houses are judged is contained in the Housing Act, 1957, which is an extremely low standard and, for many years, it has been hoped that it would be raised in order that a bath, a hot water service, an inside W.C. and a fuel-store could be demanded and other reasonable amenities such as artificial light provided. Whilst discussing standards, one must stress that the terms "twilight" and "out-moded" have no validity under the Housing Act.

The areas which at present are causing the greatest concern and the most frequent complaints are :—

King Street, Milsom Street and Hereford Place.

Sidney Street.

Grove Street, Burton Street and Park Street.

The Grosvenor precinct containing a considerable number of vacant houses which are deteriorating.

THE PROBLEMS OF REGENCY CHELTENHAM



THE PROBLEMS OF REGENCY CHELTENHAM



In many of these areas a number of Closing and Demolition Orders already exist and one feels that, especially with the King Street area, steps should be taken to redevelop this in the same way as the North Ward. Many of the demolition sites are distinctly unsavoury, further deterioration taking place in the remaining houses as the young move out and the old die.

Our present programme of dealing with approximately 50 premises that are not repairable at reasonable cost each year will continue, together with the inspection of premises and the service of repair notices at the rate of some 200 a year.

Lansdown Crescent

A survey of Lansdown Crescent, comprising 46 houses in two separate blocks, built approximately 140 years ago, was undertaken towards the end of the year. These houses were originally intended for occupation as single units, but they are now let either floor by floor as separate flats or, in some cases, let off as bed-sitting rooms, the number of flats numbering 200, occupied by 347 persons. The defects have been dealt with either by Closing Orders, 25 having been made on basements and 3 on flats, or nuisance notices, 54, during recent years, having been served on the owners to carry out necessary repairs.

MOVEABLE DWELLINGS

CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960

There are 8 licensed caravan sites in the Borough with space for 158 caravans.

COMMON LODGING HOUSE

The standards at the privately owned Common Lodging House within the Borough continue to be satisfactory. Regular inspections are carried out each month.

PLANS

A considerable number of plans of new buildings in the Borough have been examined during the year and observations submitted under the various Acts and Regulations dealt with by this Department, e.g. Clean Air Act, Offices, Shops and Railway Premises Act, Public Health Act, etc.

MERCHANDISE MARKS ACT, 1926

113 visits were made during the year under this Act, dealing with the marking of meat, tomatoes, etc.

FOOD AND DRUGS ACT

58 complaints were received from members of the public in respect of food, nearly half of which concerned meat and meat products.

Three cases were dealt with in the Magistrates' Court, details of which are as follows :—

Sample No. 1—Lemon Crush

A carton of frozen lemon crush, purchased from a local shop, was found to be affected with mould. The sample was submitted to the Public

Analyst, who reported that the black "spots" were spores of a mould which grows in acid solution especially when citric acid is present. On investigation it was discovered that the lemon crush had been received at the shop from the wholesalers some time prior to October, 1966, and, when sold on 4th April, 1967, was at least 5 months' old. The vendor was fined £25 plus £5 5s. 0d. costs.

Sample No. 131—Fruit Pie (Apple)

A member of the public purchased a fruit pie from a delivery vehicle on 28th September, and, when opened at 2.20 a.m. the following morning by her husband who was working a night shift, it was found to be mouldy.

The code on the pie indicated that it was manufactured on 15th September, and it was, therefore, 13 days' old when sold. The vendors were fined £25 plus £5 5s. costs for an offence under Section 2 of the Food and Drugs Act.

Sample No. 154—Meat Pastie

On 25th September, a portion of a meat pastie in which was embedded a cork tip of a cigarette, was submitted at the office by a member of the public. The Public Analyst reported that the cigarette end showed evidence of having been smoked and that it had been cooked in the pie.

In the Magistrates' Court the bakers were fined £25 plus £10 10s. costs for selling food not of the quality demanded.

FOOD SAMPLING

Only two samples—No. 11 (Cream Doughnuts), which was found to contain artificial cream, and No. 185 (Dried Apricots), which contained sulphur dioxide to the extent of 3,200 p.p.m., were adversely reported upon by the Public Analyst, out of the 224 submitted for chemical examination during the year.

A warning letter was sent to the manufacturer/vendor of the doughnuts and a subsequent formal sample of apricots taken at the same source had a sulphur dioxide content of 1,725 p.p.m. The Analyst stated that it appeared that the sulphur dioxide was rather unevenly distributed and was only just below the permitted limits.

Six samples were taken for bacteriological analysis, details of which are as follows :—

<i>Sample</i>	<i>Analysis</i>	<i>Remarks</i>
Watercress	Presumptive coliform count— 24/gm. of watercress. Presumptive faecal coli count— 3/gm. of watercress.	Many specimens of watercress show this degree of contamination.
Mussels	Presumptive faecal coli count— 4.5/ml.	Readings of less than 5 are considered satisfactory and above 5—15 suspicious.
6 Oysters	Faecal coli were not detected in this sample which was, therefore, satisfactory.	

<i>Sample</i>	<i>Analysis</i>	<i>Remarks</i>
Brawn	The sample was heavily contaminated with non pathogens, i.e. aerobic spore bearers, protous and Staph. albus. No pathogens of the food poisoning types were isolated.	
German salami	The sample was moderately contaminated with Staph. albus. No pathogens of the food poisoning types isolated.	
Boiled winkles	No faecal coli detected.	

FOOD HYGIENE (MARKETS, STALLS AND DELIVERY VEHICLES) REGULATIONS, 1966

Many contraventions of the above Regulations have been found on food delivery vehicles during the year. They include such items as lack of a wash-hand basin, together with an adequate supply of hot water, soap, nailbrush and clean towels, first-aid equipment, no name and address displayed on the vehicle, etc., and letters were sent to the owners requesting compliance.

Concern was expressed by the Council as to the inadequacy of the Regulations covering the delivery of meat. A letter was, therefore, sent to the Association of Municipal Corporations regarding this and they replied stating that a Code of Practice covering Hygiene in the Transport and Handling of Meat and Meat Products was being prepared designed to bring about an improvement in the hygienic handling of meat, and it was suggested that the Council await the publication of this Code.

There are 704 premises in the Borough which are subject to the Food Hygiene (General) Regulations 1960, as follows :—

	Food Preparation Premises	Public Houses	Butchers	Bakers	Fish Fryers	Other Food Shops
No. of Premises	247	109	58	15	18	257
No. of Premises fitted to comply with Reg. 16	246	107	54	15	18	224
No. of Premises to which Reg. 19 applies	247	107	58	15	18	235
No. of Premises fitted to comply with Reg. 19	247	107	58	15	18	233

SAMPLES OF FOOD AND DRUGS SUBMITTED FOR ANALYSIS

In accordance with Ministry of Health requirements, the following samples were taken :

Commodity			Formal	Informal	Commodity			Formal	Informal
Almond Paste...	...	1	—		Laxative Mixture	...	—	1	
Apples	...	—	4		Laxative Pellets	...	—	1	
Arrowroot	...	—	1		Lemon Curd ...	...	1	—	
Baking Powder	...	—	1		Lemon Pie Filling	...	1	—	
Bamboo Shoots	...	—	1		Lemon Sweets	...	1	—	
Basil Leaves ...	...	—	1		Lettuce	...	—	1	
Beef Sausages	...	5	—		Liver Croquettes	...	1	—	
Beer	...	3	—		Lolly Syrup	...	1	—	
Blackberry Syrup	...	1	—		Margarine	...	—	1	
Blackcurrant Cordial...	2	—			Milk	...	36	5	
Brandy	...	1	—		Milk Shake Syrup	...	1	—	
Brandy Flavour	...	—	1		Mincemeat	...	2	—	
Brawn	...	1	—		Mineral Water	...	1	—	
Bread	...	—	1		Nut Bar	...	1	—	
Breakfast Sausage	...	—	1		Orange Drink	...	1	—	
Butter	...	3	2		Pastie ...	...	—	2	
Cake Fruit Mixture	...	1	—		Pate de Foie ...	...	—	1	
Cakes ...	...	—	1		Peanut Butter...	...	1	—	
Caraway Seeds	...	—	1		Pears ...	...	—	1	
Cheese	...	—	4		Pease Pudding	...	1	—	
Cheese Puffs ...	...	1	—		Peppermint Cordial	...	1	—	
Cheese Spread	...	—	1		Pickle ...	...	1	—	
Chicken Paste	...	—	1		Pineapple Juice	...	—	1	
Chicken Spread	...	—	1		Poppy Seed ...	...	—	1	
Chocolate Drops	...	1	—		Pork ...	...	—	1	
Christmas Pudding	...	2	—		Pork Sausages	...	8	—	
Chutney	...	—	2		Potato Sticks ...	...	1	—	
Cider Vinegar	...	1	—		Quinine	...	—	2	
Cockles	...	1	—		Ravioli	...	—	1	
Coconut Mushrooms...	1	—			Rice ...	...	1	—	
Coffee and Milk	...	—	1		Rose Water	...	—	1	
Cold Cure	...	—	1		Rolled Oats	...	—	1	
Cough Tablets	...	—	1		Rum	...	1	—	
Cream ...	...	2	—		Saccharin	...	—	1	
Cream Doughnuts	...	4	—		Salad Cream	...	1	—	
Creamed Rice	...	1	—		Sauce ...	...	—	2	
Custard Powder	...	4	—		Sausage Savouries	...	—	1	
Demerara Sugar	...	—	1		Semolina	...	1	—	
Diet Food	...	—	2		Sherry...	...	1	—	
Dried Apricots	...	—	1		Soda Tablets	...	—	1	
Faggots	...	1	—		Soup	...	—	1	
Fish Cakes	...	1	—		Sponge Mixture	...	1	—	
Fish Paste	...	1	—		Steak ...	...	1	—	
Foam Crystals	...	—	1		Steak Pie	...	1	—	
Gateau	...	1	—		Stew ...	...	—	1	
Gelatine	...	—	1		Stewed Steak...	...	1	—	
Gin	...	2	—		Stomach Mixture	...	—	2	
Glace Cherries	...	1	—		Sugarless Jelly	...	—	1	
Grape Juice	...	—	1		Sunflower Seed Oil	...	—	1	
Grapes	...	—	1		Sweets...	...	4	—	
Hazelnut Spread	...	—	1		Tea	...	1	—	
Herbal Laxative	...	—	1		Tea and Milk...	...	—	2	
Honey Spread	...	—	1		Tinned Pears...	...	—	1	
Ice Cream	...	7	—		Tinned Peas	...	—	1	
Ice Cream Powder	...	—	1		Tinned Pineapple	...	—	1	
Instant Coffee	...	2	—		Toffee Apple ...	...	—	1	
Instant Milk	...	1	—		Tomatoes (Imported)	...	—	2	
Irish Stew	...	1	—		Vinegar	...	—	1	
Jam	...	2	1		Vodka ...	...	1	—	
Jelly	...	2	—		Whisky	...	6	—	
Junket Tablets	...	—	1		White Pudding	...	1	—	
Lard	...	2	—						

Number of samples taken during 1967 :

Formal ...	...	...	...	...	142
Informal	...	...	...	...	82
Total ...					<u>224</u>

FOREIGN MATTER AND MOULD IN FOOD

During the year 33 complaints were received with regard to foreign matter or mould in food. 11 of these were reported to the Health and Welfare Committee and the following action was taken :—

<i>Sample No.</i>	<i>Description</i>	<i>Report of Public Analyst</i>	<i>Action Taken</i>
243	Decomposing Steak and Kidney Pie	—	Warning letter to Vendor and Manufacturer.
280	Bread containing Larva	—	Warning letter to Manufacturer.
1	Mould in Lemon Crush	Dark spots identified as Mould	Proceedings; Vendor fined £25 plus £5 5s. Costs
6	Mouldy Eclairs	—	Warning letter to Vendor.
24	Foreign Body in Milk	Identified as body of dead spider	Warning letter to Dairy.
49	Mouldy Sausages	—	Warning letter to Vendor.
50	Mouldy Faggots	—	Proceedings authorised, but later withdrawn in view of new evidence. Warning letter sent to Vendor and Manufacturer.
116	Mouldy Faggots	—	Warning letter to Vendor.
131	Mouldy Fruit Pie	—	Proceedings against Vendor; fined £25 plus £5 5s. Costs.
154	Cigarette end in Meat Pastie	Cigarette end had been present in pastie at time of cooking	Proceedings authorised; Manufacturer fined £25, plus £10 10s. Costs.
158	Earwig in Meat Pastie	Earwig had been cooked in the Pastie.	Warning letter to Manufacturer/Vendor.

PARTICULARS OF FOODSTUFFS EXAMINED AND REJECTED AS UNFIT FOR HUMAN CONSUMPTION

Tinned Foods				<i>Tins</i>	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Meat	...	...	...	375	—	10	2	18
Fish	...	...	...	227	—	—	4	26
Vegetables	...	...	...	1,585	—	16	1	8
Milk and Cream	...	...	...	69	—	—	1	20
Fruit	...	...	...	1,921	1	5	0	21
Soup	...	...	...	43	—	—	1	11
Jam	...	...	...	14	—	—	1	12
Fruit Juice	...	...	...	38	—	—	2	3
Milk Puddings	...	...	...	25	—	—	1	2
Total				4,297	2	15	1	9

General					<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Meat	...	...	...	...	1	9	2	17
Fish	...	...	...	...	—	1	2	24
Bacon	...	...	...	...	—	—	—	5
Eggs	...	...	...	...	—	—	1	—
Butter and Cheese	...	...	...	...	—	1	2	18
Poultry	...	...	...	...	—	4	0	14
Frozen Food	...	...	...	...	1	0	2	2
Fresh Fruit and Vegetables	...	...	...	...	—	17	0	9
Flour and Cereals	...	...	...	...	—	—	1	24
Miscellaneous	...	...	...	...	—	6	3	15
Total				...	4	2	1	16
Grand Total				...	6	17	2	25

MILK AND DAIRIES (GENERAL) REGULATIONS, 1959

Cream

During the year samples of cream manufactured in a local Dairy, taken not only in the Borough but outside by County and other Authorities, failed the methylene blue test and, very often, the accompanying tests indicated the presence of coliform organisms. There are, of course, no standards laid down by statute, but this sampling has underlined a serious deficiency in Dairy Regulations.

The Public Health Laboratory Service and this Department carried out considerable and detailed tests on the cream pasteurisation and cooling plant, which included sampling cream immediately after separation (i.e. before pasteurisation), the separated whey used for balancing, and cream stored after one day (i.e. after pasteurisation).

It may be noted here that in one sample of whey, the bacterial count was 300,000 and the faecal coli count 89,000, this immediately following separation of milk pasteurised that day on the premises.

In this particular Dairy approximately 300 gallons of cream a week are prepared and pasteurised after balancing. Much of this cream stored in

churns is transported the next day to other subsidiary dairies where it is packed in cartons for retail sale throughout the county.

The firm are now building a new creamery in which all cartoning and packing will take place, so reducing handling hazards.

Milk

Following representations from this Department a new bottle washing machine was installed in a local Dairy.

Soon after installation bacteriological sampling of the bottles gave unsatisfactory results and subsequent investigation and tests indicated that the trouble lay in the final rinse process. After discussion with the manufacturers of the machine and the detergent and sterilising manufacturers, the water softening additive was altered, resulting in a considerable improvement.

Milk Sampling

In addition to the 41 samples of milk taken during the year for chemical analysis, 50 samples of pasteurised milk and 11 samples of ultra heat-treated milk were submitted for bacteriological examination. One sample of pasteurised milk failed the methylene blue test.

3 samples of milk were subjected to an anti-biotic test; all were negative, no pencillin being present.

LIQUID EGG (PASTEURISATION) REGULATIONS, 1963

There are no egg pasteurisation plants in the district. One sample of liquid egg was submitted to the Public Analyst for the Alpha-Amylase test and was satisfactory.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

One sample of washed flock was reported by the Analyst to have failed the requirements of the Rag Flock and Other Filling Materials Regulations, 1961, in respect of chloride content. 38 parts per hundred thousand were present, the maximum permitted being 30 parts per hundred thousand. Further samples were taken, one from the same bale as the previous sample and one from a new unopened bale received from the same source. The result of the sample from the unopened bale was still unsatisfactory and, following a warning letter, the firm destroyed the remaining flock.

CONSUMER PROTECTION ACT, 1961

A sample nightdress was submitted for testing in accordance with the requirements of the Nightdresses (Safety) Regulations, 1967. The garment was cotton and was submitted for testing for flammability performance before and after several washes. It complied with the Regulations in every respect.

SHOPS ACT, 1950

An application was received from a multiple store in the town for six-day trading, meaning the granting of an exemption from the early closing provisions of Section 1 of the Shops Act, 1950 (provision for half-day closing). A ballot was conducted by the firm concerned and also by the Cheltenham Chamber of Commerce, but it was impossible to correlate the

two so as to ascertain whether the wishes of occupiers of particular classes of retail shops were the same in both ballots, principally because one poll included a class of shop known as a "mixed shop" (defined as a shop in which two or more trades or businesses are carried on as the principal trades or businesses of the occupier of that shop) and the other poll did not. As these polls had been conducted on a different basis, the Council decided to conduct their own independent poll.

Of 670 retailers circularised in the central area, 395 completed voting papers, representing 59%. There were 155 votes in favour of exemption and 240 against, with three abstentions. The Council, being satisfied that the occupiers of shops of the following particular classes within the area were in favour of the making of an Order exempting such occupiers from the early closing provisions of Section 1 of the Shops Act, 1950, resolved that an Order be made in respect of these businesses :—

- Antiques
- Baker
- Caterer
- Coal and Fuel
- Dryer, Cleaner and Launderer
- Drapery and Haberdashery
- Electrical Appliances and Accessories
- Furniture and Bedding
- Gardening Requisites and Seedsman
- Motor Cars, Motor Cycles, Accessories, etc.
- Newsagent
- Pictures and Fine Art
- Shop and Office Supplies including Registers
- Travel Bureau
- Sports Outfitter
- Dance and Theatrical Requirements
- Secondhand Dress Agency
- Dress Fabric Specialist

This Order came into force on 1st May, 1967.

PUBLIC ABATTOIR

The number of animals slaughtered at the Abattoir again showed an increase over the previous year, the figure of 42,476 being 405 more than in 1966.

The number of cattle brought to the Abattoir for slaughter, having reacted to the Tuberculin Test, from farms all over the County, was markedly higher than in the previous year. In 1966, 309 "T.T. Reactors" were slaughtered, a figure more than double that of 1965, whilst a further increase of one third, to 418, was recorded in 1967; this in spite of the fact that testing was not carried out for several weeks at the end of the year because of the outbreak of foot and mouth disease. Over half of the animals slaughtered as "T.T. Reactors" were found, on examination, to have localised tubercular lesions and in one case the infection was generalised requiring total rejection as unfit for human consumption of the carcass and all its organs. Reactors apart, tubercular lesions of a localised nature were found in only one bovine animal during the year.

One encouraging factor is the steady reduction of the incidence of tubercular infection in pigs. Pigs are not subjected to the tuberculin test on the farms, but during the year under review, localised lesions only of the disease were found in 0.6% of the 13,603 pigs examined.

The outbreak of foot and mouth disease towards the end of the year had considerable effect on the work of the Abattoir, although no incident directly involved the Abattoir. Several cases occurred in the area at the height of the epidemic and the normal flow of livestock from the various markets was interrupted. The transport of live animals from one area to another was allowed only by licences issued by the Police, which did not permit movement into, through, or from infected areas. This meant considerable upheaval in the wholesale meat trade generally, e.g. cattle and sheep normally purchased in South Wales for slaughter at Cheltenham Abattoir, had to be slaughtered there and brought as carcasses. Similarly, large quantities of pigs bought from farms in the North Gloucestershire area, were not permitted to be transported away alive, but were killed at the Abattoir and removed as carcasses. On three occasions animals being transported through the infected area were stopped and diverted by the Police for slaughter at the Abattoir. Each incident occurred outside normal working hours and the premises were opened especially to deal with them. The Council did not provide facilities for cleansing and disinfecting livestock transporters but, during the outbreak, every assistance was given to hauliers to enable these and all other precautions to be taken. The outbreak did not necessitate any other change from the normal standards of work from the point of view of hygiene and meat inspection.

In 10 cattle cysticercus bovis lesions were found and the carcasses submitted to refrigeration. In 2 cases the cysts were found in the heart musculature and in 8 the masseter muscles of the head were the sites of infestation. In one case a further cyst was also found in the diaphragm.

With effect from 1st February, amendments to the Slaughterhouse (Hygiene) Regulations became operative. These require that :—

- (a) Animals be not kept in lairage awaiting slaughter for more than 72 hours — the effect of this was marginal inasmuch as the Abattoir Byelaws had previously permitted this only up to 96 hours maximum — and,
- (b) No wiping cloths to be used on meat, except that until 1st November, 1968, they may continue to be used if sterilised after each carcass. This, trivial though it may sound, was in fact a major break with traditional methods and practice. There is, of course, no doubt that the combined use of wiping cloths and warm water is a most objectionable practice from a bacteriological point of view, but a suitable alternative method had to be provided. This was done in the form of cold water spray-and-jet nozzles attached to the main supply and proved most satisfactory.

Two major items involving expenditure at the Abattoir were carried out during the year by the Abattoir's own staff. These were :—

- (a) The installation of dividing rails and gates, hay racks and water troughs to the large covered lairage, as required by the Slaughter of Animals (Prevention of Cruelty) Regulations, thus providing accommodation for 5 separate pens, each of about 12 cattle. This at a cost of about £400.
- (b) The removal of the old vertical boiler, after its condemnation by the Insurance Company's representatives and its replacement by a 3-pass Package Powermaster boiler with a considerably higher rate of efficiency and economy. This at a cost of approximately £3,000.

CARCASSES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART AT CHELTENHAM PUBLIC ABATTOIR

Annual Summary ending 31st December, 1967

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed	4,947	532	689	22,705	13,603	42,476
Number inspected	4,947	532	689	22,705	13,603	42,476
No. of "TT Reactors" (See separate table)	125	275	18	—	—	418
Totals excluding "TT Reactors"	4,822	257	671	22,705	13,603	42,058
All diseases except Tuberculosis and Cysticercosis						
Whole carcasses condemned	6	10	27	241	74	358
Carcasses of which some part or organ was condemned	1,452	125	6	1,751	1,095	4,429
% affected with disease other than tuberculosis and cysticercosis	30.4	52.6	4.9	8.7	8.6	11.4
Tuberculosis only						
Whole carcasses condemned	—	—	—	—	—	—
Carcasses of which some part or organ was condemned	1	—	—	—	75	76
% affected with tuberculosis	0.02	—	—	—	0.6	0.2
Cysticercosis						
Carcasses of which some part or organ was condemned	10	—	—	—	—	10
Carcasses submitted to treatment by refrigeration	10	—	—	—	—	10
Generalised and totally condemned	—	—	—	—	—	—

**ANIMALS SLAUGHTERED UNDER THE BOVINE
TUBERCULOSIS ERADICATION SCHEME DURING THE YEAR
1967 AT CHELTENHAM PUBLIC ABATTOIR**

	Cows	Bulls	Steers	Heifers	Calves	Total
Total number of "TT Reactors"	275	1	23	101	18	418
No. of carcasses totally rejected (Generalised Tuberculosis)	—	—	1	—	—	1
No. found to have localised lesions only	146	1	15	71	3	236
% infected with tuberculosis	53.1	100.0	69.7	70.3	16.7	56.8

**CARCASSES REJECTED AS TOTALLY UNFIT FOR
HUMAN FOOD, 1967**

Diseases	Bulls	Cows	Heifers	Steers	Calves	Sheep	Pigs	Total
Abscesses, Multiple	—	—	—	—	—	7	5	12
Actinobacillosis, generalised, actinomycosis, generalised	—	—	—	—	—	—	—	—
Anaemia, advanced	—	—	—	—	—	1	—	1
Blackleg	—	—	—	—	—	—	—	—
Bruising, extensive and severe	—	—	—	—	—	3	—	3
Cysticercus bovis, generalised	—	—	—	—	—	—	—	—
Cysticercus, cellulosae	—	—	—	—	—	—	—	—
Cysticercus ovis, generalised	—	—	—	—	—	—	—	—
Decomposition, generalised	—	1	—	—	—	2	—	3
Emaciation, pathological	—	3	—	—	—	56	1	60
Fever (including salmonellosis)	—	1	1	—	1	4	7	14
Foot and mouth disease	—	—	—	—	—	—	—	—
Immaturity								
(a) Stillborn or unborn carcasses	—	—	—	—	—	—	—	—
(b) Oedematous carcasses and carcasses in poor physical condition	—	—	—	—	6	—	—	6

Diseases	Bulls	Cows	Heifers	Steers	Calves	Sheep	Pigs	Total
Jaundice	—	—	—	—	—	7	3	10
Malignant catarrhal fever	—	—	—	—	—	—	—	—
Mastitis, acute septic	—	—	—	—	—	—	—	—
Melanosis, generalised	—	—	—	—	—	—	—	—
Metritis, acute septic	—	1	—	—	—	—	—	1
Abnormal odour, associated with disease or other conditions prejudicial to health	—	—	—	—	—	—	—	—
Oedema, generalised	—	2	1	—	1	126	4	134
Pericarditis, acute septic	—	—	—	—	—	3	1	4
Peritonitis, acute, diffuse, septic	—	—	—	—	1	6	21	28
Pleurisy, acute, diffuse, septic	—	—	—	—	—	1	—	1
Pneumonia, acute, septic	1	—	—	—	—	3	2	6
Pyæmia, including joint-ill	—	—	—	—	11	9	5	25
Sarcocysts, generalised	—	—	—	—	—	—	—	—
Septicaemia or texaemia	—	1	2	—	6	11	21	41
Swine erysipelas, acute	—	—	—	—	—	—	2	2
Swine fever	—	—	—	—	—	—	—	—
Tetanus	—	—	—	—	—	—	—	—
Trichinosis	—	—	—	—	—	—	—	—
Tuberculosis, generalised	—	—	—	1	—	—	—	1
Tuberculosis, Congenital	—	—	—	—	—	—	—	—
Tumours								
(a) Malignant with secondary growths	—	1	—	—	—	—	—	1
(b) Multiple	—	—	—	—	—	2	—	2
Uraemia	—	—	—	1	1	—	2	4
TOTALS	1	10	4	2	27	241	74	359

TOTAL WEIGHTS OF MEAT AND ORGANS REJECTED, 1967

	Tons	Cwts.	Qrs.	Lbs.	Tons	Cwts.	Qrs.	Lbs.
Bovine								
Meat in Carcass	4	3	0	3				
Meat not in Carcass	2	6	1	20				
Organs and Viscera	9	3	1	10				
TOTAL	15	12	3	5	15	12	3	5
Ovine								
Meat in Carcass	4	0	1	2				
Meat not in Carcass			3	3				
Organs and Viscera	3	8	3	17				
TOTAL	7	9	3	22	7	9	3	22
Swine								
Meat in Carcass	3	6	0	12				
Meat not in Carcass	—	17	2	5				
Organs and Viscera	2	3	1	18				
TOTAL	6	7	0	7	6	7	0	7
TOTAL MEAT	14	14	0	17				
TOTAL ORGANS AND VISCERA	14	15	2	17				
TOTAL	29	9	3	6	29	9	3	6

CYSTICERCUS BOVIS

There were ten cases of Cysticercus Bovis during the year, the overall rate of infestation being 0.18 per cent.

PESTS CONTROL

One of the most important functions of the Pests Control section is the control of rats in sewers and streams. The total number of sewer man-holes baited was 482, poison bait being taken in 38.

Insofar as private dwellings are concerned, the Council provides a free service for dealing with rodent infestation. 424 complaints were received of rats and mice and 403 concerning other pests, including beetles, ants, wasps, etc. The number of visits paid by the staff during the year reached 4,462.

Pigeons were also the subject of many complaints owing to their activities on Church buildings and in the roof spaces of the larger Regency properties in the town and effective action has been taken to deal with these pests.

PREVENTION OF DAMAGE BY PESTS ACT, 1949
PART I — RATS AND MICE

		<i>Rats</i>	<i>Mice</i>		<i>Total</i>
1. Complaints Received	...	249	175		424
2. Number of Premises Inspected :					
(a) As a result of complaint :					
Private Dwellings	...		309		
Business Premises	...		119		
Local Authority Properties			25		
			—		453
(b) As routine visit or survey :					
Private Dwellings	...		594		
Business Premises	...		176		
Local Authority Properties			95		
			—		865
3. Number of Premises found to be infested :					
		<i>Rats</i>	<i>Mice</i>		
Private Dwellings	...	219	153	372	
Business Premises	...	51	53	104	
Local Authority Premises...		34	37	71	
				—	547
4. Number of Visits Paid :					
(a) For inspection	... ..	1,043	426	1,469	
(b) For treatment	... ..	1,303	879	2,182	
				—	3,651
5. Sewer Maintenance Treatments :					
Total number of manholes in Borough	... ..				1,657
Maintenance Treatment No. 41 (April, 1967) :					
Number of sewer manholes baited with poison				241	
Number of sewer manholes where poison bait taken	... ..			25	10.3%
Maintenance Treatment No. 42 (October, 1967) :					
Number of sewer manholes baited with poison				241	
Number of sewer manholes where poison bait taken	... ..			13	5.4%

PART II — OTHER PESTS

1. Complaints Received :

<i>Ants</i>		<i>Moles</i>		<i>Wasps</i>	<i>Insects,</i>	
<i>Flies</i>	<i>Beetles</i>	<i>Rabbits</i>	<i>Pigeons</i>	<i>Bees</i>	<i>etc.</i>	<i>Total</i>
24	43	7	28	293	8	403

2. Number of Visits Paid :

Inspection	17	27	22	110	78	15	269
Treatment	15	41	11	210	265	—	542

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